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DENTAL HYGIENE DEPARTMENT
ASSESSMENT PLAN

Introduction

The Dental Hygiene Department (DH) annually completes an accreditation report, with a site visit every 7 years, by the Commission on Dental Accreditation (CODA). Every three years the program completes a program review for the university. These 3-year reports then feed into the required 8-year report to the Kansas Board of Regents (KBOR).

A departmental Assessment Plan will provide a mechanism that evaluates student learning and program outcomes on a variety of levels. The table on page three outlines the Assessment Matrix for the program. Annually the faculty with student representation reviews the data during its retreat and determines appropriate changes for curriculum and program improvement.

Mission

The mission of the Dental Hygiene Program is to be a learning community dedicated to excellence and innovation in:

- Educating and mentoring dental hygiene students and professionals
- Community involvement and partnerships
- Professional development and scholarship

Goals

The goals of the program are:

- Provide an entry-level Bachelor of Science degree in Dental Hygiene in this geographic area which will attempt to meet societal needs.
- Provide educational experiences which will enable program graduates to achieve licensure as a dental hygienist in any state.

Program Objectives:

The objectives of the program are:

1. Maintain a quality accredited curriculum consistent with the Program mission, vision, and values.
2. Document regular assessment and modification of the curriculum and program.

3. Review and monitor board performance with results expected to be at or above the regional or national average.
4. Maintain student, faculty, and Program policies as required by CODA and WSU.
5. Maintain student, faculty, and clinic records as required by CODA and WSU.

Student Objectives for Assessment

1. Students will obtain the academic and clinical foundation required to practice as a member of the dental team which develops and implements comprehensive dental hygiene care.
2. Students will successfully complete the National Board Examination.
3. Student will successfully complete a Clinical Board Examination.
4. Students will have an appropriate level of knowledge of dental hygiene practice as assessed by their employer.
5. Students will have an appropriate level of knowledge of dental hygiene practice as self- assessed as a graduate.
6. Students will be able to assess, plan, implement, and evaluate community-based oral health programs.

Dental Hygiene
Assessment Matrix

	Minimum Frequency							Responsibility
	Each Course/semester	Annually	Every 2 years	Every 3 years	Every 7 years	Ongoing		
Student & Program Assessment								
Course Evaluations	X							Faculty
WSU Exit Survey		X						University
New Graduate Survey (6 months post grad)		X						Dept. Chair
Employer Survey				X				Dept. Chair
National Board passing rates		X						Dept. Chair
Clinical Board passing rates		X						Dept. Chair
National Board subject performance		X						Dept. Chair
Clinical Board performance		X						Dept. Chair
Student graduation rates		X						Dept. Chair
Accreditation Review					X			Faculty and Dept. Chair
University Program Review				X				Faculty and Dept. Chair

Competency Document
Wichita State University
Dental Hygiene Department

Program Competency (the WSU graduate will be competent in…)	**Related Courses**	**Key Performance Indicators**
Infection and hazard control procedures to prevent transmission of disease and provide a safe environment	DH 311, DH 317, DH 319, DH 331, DH 332, DH 333,, DH 431, DH 416, DH 434, DH 435 Competency: Clinical DH I, II, III, and IV	Competency checks, Daily clinical evaluations, Competency Evaluations, Peer evaluations
Assessment of the child, adolescent, adult, geriatric, and special needs patient.	DH 311, DH 317, DH 335, DH 318, DH 331, DH 332, DH 314, DH 333, DH 431, DH 416, DH 434, DH 319, DH 410, DH 432, DH 435, DH 440 Competency: Clinical DH I, II, III, and IV; Concepts I, II and III	Competency checks, Daily clinical evaluations, Competency Evaluations, Peer Evaluations, Patient Projects (biofilm patient, periodontal patient, geriatric patient, special needs patient), Clinical Boards
Treatment planning and case presentation for the child, adolescent, adult, geriatric, and special needs patient.	DH 311, DH 314, DH 317, DH 319, DH 331, DH 332, DH 333, DH 335, DH 431, DH 416, DH 434, DH 432, DH 435, DH 410, DH 440 Competency: Clinical DH I, II, III, and IV; Concepts I, II, and III	Daily clinical evaluations, Competency Evaluations, Peer Evaluations, Patient Projects (biofilm patient, periodontal patient, geriatric patient, special needs patient), Clinical Boards

Competency Document
Wichita State University
Dental Hygiene Department

Program Competency (the WSU graduate will be competent in…)	**Related Courses**	**Key Performance Indicators**
Health education strategies for disease prevention and health promotion	DH 311, DH 331, DH 332, DH 314, DH 333, DH 431, DH 434, DH 432, DH 410, DH 440, DH 435 Competency: Clinical DH I, II, III, IV, Concepts I, II, and III, DH 410 and 440.	Daily clinical evaluations, Competency evaluations, Peer Evaluations, Patient Projects (biofilm control patient, dietary analysis patient, periodontal patient, geriatric patient, special needs patient), Health Education Teaching Units, National Boards
Provision of preventive and therapeutic dental hygiene care for the child, adolescent, adult, geriatric, and special needs patient.	DH 311, DH 331, DH 332, DH 335, DH 314, DH 319, DH 333, DH 335, DH 431, DH 416, DH 434, DH 334, DH 432, DH 435 Competency: Clinical DH I, II, III, and IV	Daily clinical evaluations, Competency evaluations, Peer Evaluations, Patient Projects (biofilm, patient, periodontal patient, geriatric patient, special needs patient), National Boards, Clinical Boards
Supportive procedures (pain control strategies and devices to assist with dh care)	DH 319, DH 331, DH 332, DH 333, DH 431, DH 416, DH 434, DH 432, DH 435, HS 301. Competency: Clinical DH III and IV; Concepts, I-III.	Successful completion of DH 416, Competency evaluations, Peer Evaluations, Patient Projects, (biofilm patients, periodontal patient, geriatric patient, special needs patient), National Boards, Clinical Boards

Competency Document
Wichita State University
Dental Hygiene Department

Program Competency (the WSU graduate will be competent in…)	**Related Courses**	**Key Performance Indicators**
Management procedures (emergency management, communication, time management, uphold ethical values, protect patient's privacy, evaluate scientific literature)	DH 311, DH 331, DH 332, DH 314, DH 333, DH 431, DH 416, DH 434, DH 334, DH 432, DH 410, DH 440, DH 407, DH 435, DH 470 Competency: Clinical DH III & IV; Concepts I-III, Community; Ethics, Issues	Daily clinical evaluations, Competency evaluations, Patient Portfolio's (periodontal patient, geriatric patient, special needs patient), National Boards
Community oral health strategies	DH 314, DH 410, DH 440	Projects completed in DH 410 and 440, National Boards

Dental Hygiene Courses by Competencies – Junior Year

Course	Infection Control	Assess	Trt. Plan	Health Ed.	DH Care	Supportive Procedures	Mgmt.	Comm OH
Fall								
DH 311 Preclinic	X	X	X	X	X		X	
DH 317 Radiology	X	X	X					
DH 318 Oral Anatomy, Histology. & Embryology		X						
DH 319 Dental Materials	X	X	X		X	X		
Spring								
DH 331 DH Concepts I	X	X	X	X	X	X	X	
DH 332 Clinical DH I	X	X	X	X	X	X	X	
DH 335 Gen. & Oral Path.			X		X			
DH 314 Intro. to Perio.		X	X	X	X	X	X	X
DH 334 Evidence Based Practice							X	
Summer								
DH 333 Clinical DH II	X	X	X	X	X	X	X	

Dental Hygiene Courses by Competencies – Senior Year

Course	Infection Control	Assess	Trt. Plan	Health Ed.	DH Care	Supportive Procedures	Mgmt.	Comm OH
Fall								
DH 431 DH Concepts II	X	X	X	X	X	X	X	
DH 416 Pain Mgmt.	X	X	X		X	X	X	
DH 434 Clinical DH III	X	X	X	X	X	X	X	
DH 410 Comm. OH Mgmt I		X		X			X	X
Spring								
DH 432 DH Concepts III		X	X	X	X		X	
DH 407 Ethics & Juris.							X	
DH 440 Comm. OH Mgmt II		X		X			X	X
DH 435 Clinical DH IV	X	X	X	X	X	X	X	
DH 470 Issues					X		X	

Wichita State University
Dental Hygiene Department
Curriculum Management Plan

On-going Curriculum Review

Completed by:	Dental Hygiene Students	Dental Hygiene Course Instructors	Dental Hygiene Faculty/Student Representatives
Schedule:	End of each course	Once a year per course	
Measurement/Instrument:	Student Evaluation of Faculty & Course	Course Review Student Evaluations Review	
Schedule:			PreSession
			•Curriculum Review •Surveys (Graduate, Employer, Exit, WSU Graduate Survey) Review •Board Result Review •Determine program or curricular changes

Evaluation of Dental Hygiene Courses Related to Defined Dental Hygiene Competencies

Completed by:	Dental Hygiene Course Instructors	Dental Hygiene Faculty
Schedule:	Annually	Annually
Measurement/Instrument:	Review Competency Document	• Review competencies • Discuss improvements needed

Coordination of Instruction Among DH Program Faculty and Other Faculty Teaching DH Students

Method1: Course syllabi are available for review by all Dental Hygiene and other faculty.
Method 2: Each semester a calibration/in-service is scheduled for clinical faculty to review clinic course content, competency evaluations, and course objectives. Monthly clinical faculty meetings are held for each clinical course.
Method 3: Department chairperson will meet with College faculty who teach dental hygiene students annually.
Method 4: Department chairperson and appropriate faculty meet annually with supervising dentists.

Learning Outcomes Upon graduation the student will be competent in:	Assessment Tools (portfolios, rubrics, exams)	Target/Criteria (desired program level achievement)	Results	Analysis
Knowledge required to enter the dental hygiene profession.	Passing the National Dental Hygiene Board Examination.	100% at or above the national passing rate.		
Clinical skills necessary to practice dental hygiene.	Passing a regional clinical examination.	100% at or above the regional passing rate.		
Infection and hazard control procedures to prevent transmission of disease and provide a safe environment.	Competency checks in preclinic. Competency evaluations in clinical courses. Completion of courses where this content is included with a "C" or 2.0 or better.	100% of students meet the learning outcome.		
Assessment of the child, adolescent, adult, geriatric, and special needs patient.	Competency checks in preclinic, Competency evaluations in clinical courses. Case analysis on Periodontal Patients, Special Needs Patient. Licensure examinations. Completion of courses where this content is included with a "C" or 2.0 or better.	100% of students meet the learning outcome.		
Treatment planning and case presentation for the child, adolescent, adult, geriatric, and special needs patient.	Competency checks in preclinic, Competency evaluations in clinical courses. Case analysis on Periodontal Patients, Special Needs Patient. Licensure examinations. Completion of courses where this content is included with a "C" or 2.0 or better.	100% of students meet the learning outcome.		
Health education strategies for disease prevention and health promotion.	Competency evaluations in clinical courses. Case analysis on Periodontal Patients, Special Needs Patient. Health Education Teaching Units. Licensure examinations. Completion of courses where this content is	100% of students meet the learning outcome.		

	included with a "C" or 2.0 or better.			
Provision of preventive and therapeutic dental hygiene care for the child, adolescent, adult, geriatric, and special needs patient.	Competency evaluations in clinical courses. Case analysis on Periodontal Patients, Special Needs Patient. Licensure examinations. Completion of courses where this content is included with a "C" or 2.0 or better.	100% of students meet the learning outcome.		
Supportive procedures such as pain control strategies and devices to assist with dental hygiene care.	Successful completion of Pain Management course. Competency evaluations in clinical courses. Case analysis on Periodontal Patients, Special Needs Patient. Licensure examinations. Completion of courses where this content is included with a "C" or 2.0 or better.	100% of students meet the learning outcome.		
Management procedures such as emergency management, communication, time management, uphold ethical values, protect patient's privacy, and evaluate scientific literature.	Competency evaluations in clinical courses. Case analysis on Periodontal Patients, Special Needs Patient. Licensure examinations. Completion of courses where this content is included with a "C" or 2.0 or better.	100% of students meet the learning outcome.		
Community oral health strategies.	Community oral health activities projects completed. Completion of courses where this content is included with a "C" or 2.0 or better.	100% of students meet the learning outcome.		
Critical thinking/case management.	Performance on the CaseBased component of National Boards.	Each graduating class' average score is at or above the national average		
Ability to complete mathematical equations; dosage, measurements, angulation, and infection control.	Completion of an entrance and exit exam on these skills.	100% of students achieve a score of 85% or higher on the exit exam.		

Satisfactorily communicate with patients regarding their oral health status.	Items #6, 7, and #8 on the Patient Satisfaction Surveys completed twice a year in the clinic.	Each graduating class' average score is at or above 3.5. Scale is 1-4.		
Produce effective written communication on designated assignments.	Performance on the following assignments:, Periodontal patient case and Special Needs patient case. A common set of components in the grading rubrics for these assignments will be used to evaluate this competency.	100% of students achieve a score of 80% or higher on the identified components of the rubric used to evaluate all the assignments		

FY 11 (2010) RESULTS
GRADUATE ASSESSMENT SURVEY
Wichita State University
Dental Hygiene Department
(TOTAL RESPONSES 2010 WERE 15 OUT OF 34 Surveys)

On the following questions, please circle the letter that best indicates your answer.

1. After you were licensed and began to seek employment, how soon were you hired as a dental hygienist?
   a: within 1 month: 11/15 = 73%
   b: within 3 months: 1/15 = 6%
   c: within 6 months: 1/15 = 6%
   d: more than 6 months:
   e. not employed yet ***(skip to question #9:*** 2/15 = 13%

2. Are you presently employed as a dental hygienist? ***(if no, skip to question # 10)***
   a: yes: 13/13 = 100%
   b: no:

3. How many dental offices are you employed in?
   a: one: 11/13 = 85%
   b: two: 2/13 = 15%
   c: three:
   d: four:

4. How many hours per week do you work in each office?

   Office 1

   less than 20 hours: (1 marked this but said she works full time hours but the other 20 are assisting)
   20-30 hours: 1/15 = 7%
   30-40 hours: 12/15 = 80%
   more than 40 hours:

   Office 2

   less than 20 hours: 2/15 = 13%
   20-30 hours:
   30-40 hours:
   more than 40 hours:

   Office 3

   less than 20 hours:
   20-30 hours:
   30-40 hours:
   more than 40 hours:

   Office 4

   less than 20 hours:
   20-30 hours:
   30-40 hours:
   more than 40 hours:

5. What type of practice(s) are you employed in? (Circle all that apply)
    a: general practice: 13/16 = 81%
    b: periodontics: 1/16 = 6%
    c: pedodontics: 1/16= 6%
    d: other (specify): 1/16 = 6%
        1). Orthodontics
    e: community health center
    f: FQHC (federally qualified health center)

6. Does your office utilize the following equipment? (Circle all that apply)
    a. laser caries detection devices such as DiagnoDent: 5/45 = 11%
    b. Intra-oral camera: 9/45 = 20%
    c. lasers for non-surgical periodontal therapy: 4/45 = 9%
    d. computerized patient records: 8/45 = 18%
    e. computerized periodontal chart: 8/45 = 18%
    f. computerized recall system: 11/45 = 24%

7. What are your responsibilities in this alternative setting?
    1). Adult & child prophy, Radiographs, Scaling & Root planning, Laser therapy, Charting, Dental Assisting.
    2). Rev Med HHX, Blood Pressure, H&N Exam, Oral cancer screening, Perio exam, X-rays VBW & Pano, Scaling, Root planning, Anesthesia, Polishing & flossing, Tx notes, Finding decay, Charting in computer, Tx planning, Rescheduling Appts, Explaining what Dr Finds, Education, Referring Out, Team work, Sterilizing, Restocking.
    3). Medical history, X-rays, Probe, Prophy, Fluoride, Enter charges/codes, schedule 6 mo. Cleaning or whatever is needed, clean room/sterilize instruments
    4). HHx review, radiography (digital), probing, prophys, DSRP, non-surgical laser tx's, oral cancer screenings, caries/faulty restoration awareness/communicate with DR. Re-Evals.
    5). Pt history, intra extra oral exam, tx planning (including pt thoughts), clean teeth (cavitron, hand instruments), dietary counseling, tobacco cessations, perio tx & maintenance, xrays, etc.

8. What best describes your practice setting?
    a: urban/suburban: 11/12 = 92%
    b: rural (< 30,000 and not within 20 miles of urban area): 1/12 = 8%

9. If you are not employed, why not? (Circle all that apply)
    a: lack of job availability: (1 marked this & said would like to find FT hygiene job but lack of job availability) ½ = 50%
    b: family responsibilities:
    c: inability to secure employment:
    d: low salaries:
    e: unsafe working conditions:
    f: non-compatible patient care philosophy:
    g: lack of benefits:
    h: other (please specify) : 1 = ½ = 50%

10. Are you working on or interested in an advanced degree? If so, which one?

Working on

Bachelor: 7/11 = 64%
Master:
DDS:
PhD:

Interested in

Bachelor: 2/11 = 18%
Master:
DDS: 2/11 = 18%
PhD:

11. Are you interested in obtaining an Extended Care Permit (ECP) when you are eligible?
    a. yes: 7/14 = 50%
    b. no: 7/14 = 50%
        If no, please indicate why (check all that apply)
            not interested: 5/7 = 74%
            don't want to work by myself: 1/7 = 13%
            don't have a sponsoring dentist:
            other: 1/7 = 13%

12. If a mid-level dental practitioner such as the Advanced Dental Hygiene Practitioner or Oral Health Practitioner became legal in Kansas, would you be interested in pursuing a career in this area of practice?

Yes: 11/15 = 73%
No: 4/ 15 = 26%
If no, please indicate why (check all that apply)
    not interested: 2/6 = 33%
    don't want to work by myself: 1/6 = 16%
    don't want to obtain additional education: 1/6 = 16%
    not confident enough in clinical skills yet: 1/6 = 16%
    other (please write in): 1/6 = 16%
        1). Would rather become DDS, If had to continue school

13. If a mid-level practitioner program existed when you applied to dental hygiene, would you have chosen a mid-level practitioner program instead of dental hygiene?

Yes: 9/14 = 64%
No: 5/14 = 36%
    1). I would have applied to both
    1). Unsure

14. Are you planning on continuing your membership to the American Dental Hygienists Association?
Yes: 12/15 = 80%
No: 3/15 = 20%
If no, please indicate why (check all that apply)
cost: 2/4 = 50%
time commitment: ¼ = 25%
disagree with association policies:
don't see value/reason for joining:
other: ¼ = 25%

15. Would you encourage someone to attend the WSU Dental Hygiene program?
Yes: 15/15 = 100%
No:
If no, please indicate why not

Please circle the letter that best indicates your answer: SA = Strongly Agree, A=Agree, D=Disagree, SD=Strongly Disagree

16. Please respond to the following question:
I was satisfied with my dental hygiene education at WSU.
SA : 14/15 = 93%
A: 1/15 = 7%
D:
SD:

My dental hygiene education at WSU prepared me to:

Please circle the letter that best indicates your answer:
SA = Strongly Agree, A=Agree, D=Disagree, SD=Strongly Disagree

My dental hygiene education at WSU prepared me to:

17. Obtain a complete medical and dental history.
SA: 14/16 = 88%
A: 1/16 = 6%
D: 1/16 = 6%
SD:

18. Maintain accurate and complete patient treatment records.
SA: 12/15 = 80%
A: 3/15 = 20%
D:
SD:

19. Recognize medical conditions that require special precautions for dental hygiene treatment.
SA: 10/15 = 67%
A: 4/15 = 27%
D: 1/15 = 7%
SD:

20. Anticipate and manage medical emergencies.
SA: 9/15 = 60%
A: 5/15 = 20%
D: 1/15 = 7%
SD:

21. Perform an extra- and intraoral examination and record findings.
SA: 11/15 = 73%
A: 4/15 = 27%
D:
SD:

22. Perform dental charting and record findings.
SA: 12/15 = 80%
A: 2/15 = 13%
D: 1/15 = 7%
SD:

23. Evaluate the patient's periodontal status and record findings.
SA: 10/15 = 67%
A: 5/15 = 33%
D:
SD:

24. Identify patients with dietary problems.
SA: 7/15 = 47%
A: 8/15 = 53%
D:
SD:

25. Determine the need for referral to other health professional(s).
SA: 7/15 = 47%
A: 6/15 = 40%
D: 2/15 = 13%
SD:

26. Recognize commonly used medications.
SA: 10/17 = 59%
A: 6/17 = 35%
D: 1/17 = 6%
SD:

27. Analyze assessment data to form a dental hygiene diagnosis.
SA: 12/17 = 70%
A: 4/17 = 24%
D: 1/17 = 6%
SD:

28. Actively involve patients in establishing oral health goals.
SA: 9/15 = 60%
A: 5/15 = 33%
D: 1/15 = 7%
SD:

29. Develop a treatment plan for dental hygiene treatment.
SA: 10/15 = 67%
A: 4/15 = 27%
D: 1/15 = 7%
SD:

30. Communicate the treatment plan to the dentist and patient.
SA: 10/15 = 67%
A: 4/15 = 27%
D: 1/15 = 7%
SD:

31. Assist patients in the development of appropriate personal oral health care.
SA: 10/15 = 67%
A: 5/15 = 33%
D:
SD:

32. Utilize educational strategies that promote patient adherence to personal oral health care.
SA: 8/15 = 53%
A: 7/15 =47%
D:
SD:

33. Utilize standard infection control procedures.
SA: 12/15 = 80%
A: 3/15 = 20%
D:
SD:

34. Expose and process a diagnostic radiographic survey.
Film based
SA: 13/16 = 81%
A: 3/16 = 19%
D:
SD:

Digital (1 marked this & said could have been used more especially since many offices are going that direction)
SA: 4/10 = 40%
A: 6/10 = 60%
D:
SD:

35. Utilize hand and ultrasonic instrumentation as appropriate.
SA: 10/14 = 71%
A: 4/14 = 29%
D:
SD:

36. Administer local anesthetic and nitrous oxide agents.
SA: 10/15 = 67%
A: 5/15 = 33%
D:
SD:

37. Select and administer appropriate chemotherapeutic agents.
SA: 7/16 = 44%
A: 7/16 = 44%
D: 2/16 = 12%
SD:

38. Utilize appropriate body mechanics to minimize work related stress or injury.
SA: 10/16 = 63%
A: 4/16 = 25%
D: 2/16 = 12%
SD:

39. Evaluate the clinical outcomes or success of dental hygiene treatment.
SA: 9/15 = 60%
A: 6/15 = 40%
D:
SD:

40. Determine the patient's satisfaction with dental hygiene care.
SA: 8/15 = 53%
A: 7/15 = 47%
D:
SD:

41. Manage a recall system.
Paper based
SA: 6/15 = 40%
A: 3/15 = 20%
D: 6/15 = 40%
SD:

Computerized system
SA: 3/15 = 20%
A: 4/15 = 27%
D: 8/15 = 53%
SD:

42. Provide dental hygiene services in a wide variety of community settings.
SA: 5/16 = 31%
A: 11/16 = 69%
D:
SD:

43. Treat patients from varying cultural backgrounds.
SA: 8/15 = 53%
A: 7/15 =47%
D:
SD:

44. Focus on the welfare and needs of each patient.
SA: 7/15 = 47%
A: 8/15 = 53%
D:
SD:

45. Ensure the privacy of patients and patient records.
SA: 9/15 = 60%
A: 6/15 = 40%
D:
SD:

46. Understand the HIPPA regulations regarding patient privacy and record handling.
SA: 8/15 = 53%
A: 7/15 = 47%
D:
SD:

47. Utilize evidence based decision making to solve clinical practice problems.
SA: 6/11 = 55%
A: 4/11 = 36%
D: 1/11 = 9%
SD:

48. Use peer evaluation experience to evaluate myself and others.
SA: 8/15 = 53%
A: 7/15 = 47%
D:
SD:

49. Interpret and evaluate oral health research.
SA: 8/15 = 53%
A: 6/ 15 = 40%
D: 1/15 = 7%
SD:

50. Function as a member of the health care team.
SA: 10/15 = 67%
A: 4/15 = 26%
D: 1/15 = 7%
SD:

51. Value the need for life-long learning.
SA: 11/15 = 73%
A: 3/15 = 20%
D: 1/15 = 7%
SD:

52. Value membership in professional organizations.
SA: 8/15 = 53%
A: 6/15 = 40%
D: 1/15 = 7%
SD:

53. Please note any areas in which you would have liked more instruction.

1). When to refer to other specialists; how to answer patients concerns about tooth aches. We had a dentist come in to talk to us one day about it, but one day doesn't help me when a patient is asking me questions about what it could be. I understand that we are more concerned with the health of the gingival but patients don't understand that and ask questions about what is hurting them and I can't answer them.
2). Using intra oral camera to find fractures, Dentrix computer systems, How to discuss with pt which alternative restoration would best fit their needs.
3). Perio
4). Identify decay or needs for restorations.
5). More perio class/classtime? I believe the bachelor program is doing that now. Feel like I have learned so much more about perio since I have been practicing (obviously)
6). Non-surgical laser therapy training, time mangagement.
7).It would be nice to get more experience in school w/computerized dental charting. I realize the logistics make it difficult to have a working computer at each chair, but it would be a nice goal for the future. This is b/c most offices are utilizing electronic records & other hygiene schools make this technology available to their students.
8). I think the clinic should incorporate dental codes in the routing slips. I know there's no insurance filed but it would be nice to get used to seeing the numbers. Insurance in the real world is very complex, but reviewing the codes would help.

54. Please make any additional comments you wish to assist us in creating and maintaining excellence in the dental hygiene program.

1).I felt overall they did a great job preparing me. I also probably would have bought my loops anyways but I've noticed even though I don't always have the best posture, my posture is better than those of the hygienist I work w/ who don't have loops. So, even though a lot of people complained about the cost, I think it was a great investment for our class.
2). I had a great time in DH! I miss everyone (students & instructors).
3). From talking to other DH that went to community colleges. I feel I was more prepared to work in the real world & would definitely tell someone to go to WSU vs. community college.
4). I think integrating the use of computers more in clinic would be a great idea. I currently work in an office that's almost completely paperless and charting and looking up pt records in much easier and quicker. The computers were there but I never used them, access to them was difficult. I think they could be put to good use instead of money just lying around. Otherwise they should sell them. It's wasted money in my opinion. Oh another note the instructors are great. I hope you keep a good Foundation to learn from.

Thanks for your help in assessing the WSU Dental Hygiene Program.

FY 12 (2011) GRADUATE ASSESSMENT SURVEY
Wichita State University
Dental Hygiene Department
(Total response was 14 out of 35 mailed)

On the following questions, please circle the letter that best indicates your answer.

1. After you were licensed and began to seek employment, how soon were you hired as a dental hygienist?

a: within 1 month	9/14	64%
b: within 3 months	2/14	14%
c: within 6 months	1/14	7%
d: more than 6 months	1/14	7%
e. not employed yet (skip to question #6)	1/14	7%

2. Are you presently employed as a dental hygienist? (**if no, skip to question # 9**)

a: yes	12/13	92%
b: no	1/13	8%

3. How many dental offices are you employed in?

a: one	8/12	67%
b: two	3/12	25%
c: three	1/12	8%
d: four	0/12	0%

4. How many hours per week do you work in each office?

	Office 1	Office 2	Office 3	Office 4
less than 20 hours	4/12 33%	4/12 33%	1/12 8%	0/12 0%
20-30 hours	3/12 25%	0/12 0%	0/12 0%	0/12 0%
30-40 hours	3/12 25%	0/12 0%	0/12 0%	0/12 0%
more than 40 hours	2/12 17%	0/12 0%	0/12 0%	0/12 0%

5. What type of practice(s) are you employed in? (Circle all that apply)

a: general practice	10/13	77%	
b: periodontics	0/13	0%	
c: pedodontics	1/13	8%	
d: other (specify)	2/13	15%	1 person Safety Net Clinic/1 person Clinic

6. What best describes your practice setting?

a: urban/suburban	11/12	92%
b: rural	1/12	8%

7. Does your office utilize the following equipment? (Circle all that apply)

a. laser caries detection devices such as DiagnoDent	5/11	45%
b. Intra-oral camera	8/11	73%
c. lasers for non-surgical periodontal therapy	3/11	27%
d. computerized patient records	9/11	82%
e. computerized periodontal chart	8/11	73%
f. computerized recall system	10/11	91%

8. What are your responsibilities in this setting?

1. Educate patients on oral hygiene, recommend the right treatment plan, reorder instruments.
2. All duties of a dental hygienist.
3. Perform routine dental hygiene procedures.
4. Some chair side when needed, perio chart, SRP, prophs, radiographs, patient education, community outreach/education
5. Review health history, x-rays, perio chart, DSRP, prophy, flz, velescope, schedule recalls, pre-D insurance.
6. See new pts. Take med/dent rx, oral cancer screenings, pre-diagnose decay, x-rays, chart-existing, probe, prophy, debridement, scale/root plane, use laser in conjunction
7. Dental hygiene responsibilities and sometimes recall
8. The Dr. diagnoses all new pt's and does probing depths himself. He tells me if the pt needs deep scales or prophy. He gives almost all anesthesia.
9. I have access to all that is circled above and use all but the diagnoDent on a daily basis.
10. Normal hygienist duties.

9. If you are not employed, why not? (Circle all that apply)

a: lack of job availability	2/2	100%
b: family responsibilities	0/2	0%
c: inability to secure employment	0/2	0%
d: low salaries	1/2	50%
e: unsafe working conditions	1/2	50%
f: non-compatible patient care philosophy	1/2	50%
g: lack of benefits	1/2	50%
h: other	0/2	0%

10. Are you working on or interested in an advanced degree? If so, which one?

	Working on		Interested in	
Master	0/11	0%	6/11	55%
DDS	0/11	0%	4/11	36%
PhD	0/11	0%	0/11	0%
1 person wrote in RDP			1/11	9%

11. Are you interested in obtaining an Extended Care Permit (ECP) when you are eligible?

a. yes 9/13 69%
b. no 4/13 31%

If no, please indicate why (check all that apply)

2/3 67% not interested
0/3 0% don't want to work by myself
0/3 0% don't have a sponsoring dentist
1/3 33% other

12. If a mid-level dental practitioner such as the Registered Dental Practitioner became legal in Kansas, would you be interested in pursuing a career in this area of practice?

Yes 13/13 100%
No 0/13 0%

If no, please indicate why (check all that apply)

_____ not interested
_____ don't want to work by myself
_____ don't want to obtain additional education
_____ not confident enough in clinical skills yet
_____ other (please write in)

13. Are you planning on continuing your membership to the American Dental Hygienists Association?

Yes 9/14 64% No 4/14 29% 1 person wrote in maybe 1/14 7%

If no, please indicate why (check all that apply)

3/5 60% cost
_____ time commitment
_____ disagree with association policies
2/5 40% don't see value/reason for joining
_____ other

14. Would you encourage someone to attend the WSU Dental Hygiene program?

Yes 13/14 93% No 1/14 7% If no, please indicate why not

Hard to find a job in Wichita.

Please circle the letter that best indicates your answer: SA = Strongly Agree, A=Agree, D=Disagree, SD=Strongly Disagree

My dental hygiene education at WSU prepared me to:

15. Obtain a complete medical and dental history

SA 13/14 93%
A 1/14 7%
D _____
SD _____

16. Maintain accurate and complete patient treatment records.

SA	14/14 100%
A	
D	
SD	

17. Recognize medical conditions that require special precautions for dental hygiene treatment.

SA	13/14 93%
A	1/14 7%
D	
SD	

18. Anticipate and manage medical emergencies.

SA	8/14 57%
A	6/14 43%
D	
SD	

19. Perform an extra- and intraoral examination and record findings.

SA	12/14 86%
A	2/14 14%
D	
SD	

20. Perform dental charting and record findings.

SA	13/14 93%
A	1/14 1%
D	
SD	

21. Evaluate the patient's periodontal status and record findings.

SA	13/14 93%
A	1/14 7%
D	
SD	

22. Identify patients with dietary problems.

SA	9/14 64%
A	5/14 36%
D	
SD	

23. Determine the need for referral to other health professional(s).

SA	11/14 79%
A	3/14 21%
D	
SD	

24. Recognize commonly used medications.

SA	9/14 64%
A	5/14 36%
D	
SD	

25. Analyze assessment data to form a dental hygiene diagnosis.

SA	12/14 86%
A	2/14 14%
D	
SD	

26. Actively involve patients in establishing oral health goals.

SA	14/14 100%
A	
D	
SD	

27. Develop a treatment plan for dental hygiene treatment.

SA	14/14 100%
A	
D	
SD	

28. Communicate the treatment plan to the dentist and patient.

SA	12/14 86%
A	2/14 14%
D	
SD	

29. Assist patients in the development of appropriate personal oral health care.

SA	12/14 86%
A	2/14 14%
D	
SD	

30. Utilize educational strategies that promote patient adherence to personal oral health care.

SA	10/13 77%
A	3/13 23%
D	
SD	

31. Utilize standard infection control procedures.

SA	13/13 100%
A	
D	
SD	

32. Expose and process a diagnostic radiographic survey.

Film based

SA	12/13 92%
A	1/13 8%
D	
SD	

Digital

SA	8/13 62%
A	4/13 31%
D	1/13 8%
SD	

33. Utilize hand and ultrasonic instrumentation as appropriate.

SA	12/13 92%
A	1/13 8%
D	
SD	

34. Administer local anesthetic and nitrous oxide agents.

SA	11/13 85%
A	2/13 15%
D	
SD	

35. Select and administer appropriate chemotherapeutic agents.

SA	11/13 85%
A	2/13 15%
D	
SD	

36. Utilize appropriate body mechanics to minimize work related stress or injury.

SA	10/13 77%
A	3/13 23%
D	
SD	

37. Evaluate the clinical outcomes or success of dental hygiene treatment.

SA	11/13 85%
A	2/13 15%
D	
SD	

38. Determine the patient's satisfaction with dental hygiene care.

SA	11/13 85%
A	1/13 8%
D	1/13 8%
SD	

39. Provide dental hygiene services in a wide variety of community settings.

SA	10/13 77%
A	2/13 15%
D	1/13 8%
SD	

40. Treat patients from varying cultural backgrounds.

SA	10/13 77%
A	3/13 23%
D	
SD	

41. Focus on the welfare and needs of each patient.

SA	11/13 85%
A	2/13 15%
D	
SD	

42. Ensure the privacy of patients and patient records.

SA	12/13 92%
A	1/13 8%
D	
SD	

43. Understand the HIPAA regulations regarding patient privacy and record handling.

SA	10/13 77%
A	3/13 23%
D	
SD	

44. Utilize evidence based decision making to solve clinical practice problems.

SA	11/13 85%
A	2/13 15%
D	
SD	

45. Use peer evaluation experience to evaluate myself and others.

SA	11/13 85%
A	2/13 15%
D	
SD	

46. Interpret and evaluate oral health research.

SA	10/13 77%
A	3/13 23%
D	
SD	

47. Function as a member of the health care team.

SA	12/13 92%
A	1/13 8%
D	
SD	

48. Value the need for life-long learning.

SA	12/13 92%
A	1/13 8%
D	
SD	

49. Value membership in professional organizations.

SA	12/14 86%
A	2/14 14%
D	
SD	

50. Please note any areas in which you would have liked more instruction.

1. Anesthesia
2. I wish we could have learned & worked more with the prophy jet. I also wish that they could have taught us how to use Eaglesoft or Dentrix thoroughly.
3. It seems like everything was greatly covered. It is a wonderful program!
4. Would have liked more information on laser use. C02 vs. Diode. Would have liked to administer anesthesia more in clinic, i.e. take the class sooner.
5. Digital x-rays – we need more practice. More offices are using digital now.
6. Dental procedure codes. More dental procedures in detail etc. fillings, RTC, implants, so they could be explained to patients by hygienists vs. assistants (when needed)
7. I would have liked to learn more about dental materials. I would also like to learn about the dental software on the computer. For instance, we use Eaglesoft. I would have liked to learn more of how to use the program such as charting, note taking & etc.
8. I think it would be good for students to learn to use digital radiography more than fil and to learn to chart using various computer programs. Paper charting is becoming more and more obsolete.
9. I would like to know more about Aresin during the program & how to use it.

51. Please make any additional comments you wish to assist us in creating and maintaining excellence in the dental hygiene program.

1. Great Program!
2. Do not have the "73% or below and you're out" rule unless you enforce it.
3. Awesome program! Highly recommend it to others.
4. I enjoyed the DH program. I enjoyed all of the instructors as well. It really helped mold me into a compassionate health professional. Thank you all so much.
5. I think the clinic has been a great asset to our community. The only advice I could give to students alone is to work on building patient relations. Patients are in the chair for hours & if we can get to know them & show them we care; they will return time & time again!
6. I love the teachers in this program. They are so dedicated, kind, & caring. I love being there @ WSU Dental Hygiene program.

Thanks for your help in assessing the WSU Dental Hygiene Program.

FY 13 (2012) GRADUATE ASSESSMENT SURVEY
Wichita State University
Dental Hygiene Department
(Total response was 12 out of 33 mailed)

On the following questions, please circle the letter that best indicates your answer.

1. After you were licensed and began to seek employment, how soon were you hired as a dental hygienist?

a: within 1 month	8/12 67%
b: within 3 months	2/12 17%
c: within 6 months	1/12 8%
d: more than 6 months	1/12 8%
e. not employed yet (skip to question #6)	

2. Are you presently employed as a dental hygienist? (**if no, skip to question # 9**)

a: yes	12/12 100%
b: no	

3. How many dental offices are you employed in?

a: one	7/12 58%
b: two	4/12 33%
c: three	1/12 8%
d: four	

4. How many hours per week do you work in each office?

	Office 1	Office 2	Office 3	Office 4
less than 20 hours	0/12 0%	3/12 25%	1/12 8%	0/12 0%
20-30 hours	2/12 16%	1/12 8%	0/12 0%	0/12 0%
30-40 hours	5/12 60 %	0/12 0%	0/12 0%	0/12 0%
more than 40 hours	0/12 0%	0/12 0%	0/12 0%	0/12 0%

5. What type of practice(s) are you employed in? (Circle all that apply)

a: general practice	9/12 75%	
b: periodontics	0/12 0%	
c: pedodontics	1/12 8%	
d: other (specify)	2/12 17%	Clinic

6. What best describes your practice setting?

a: urban/suburban	10/12 83%
b: rural	2/12 17%

7. Does your office utilize the following equipment? (Circle all that apply)

a. laser caries detection devices such as DiagnoDent	4/12	33%
b. Intra-oral camera	8/12	67%
c. lasers for non-surgical periodontal therapy	1/12	8%
d. computerized patient records	10/12	83%
e. computerized periodontal chart	8/12	67%
f. computerized recall system	9/12	75%

8. What are your responsibilities in this setting?

1. Diagnose, charting, x-rays, probing, prophy, scaling, educate pt., re-call.
2. Regular dental hygienist duties
3. Debridement, scale/root plane, xray,
4. Pt history, intra extra oral exam, tx planning, clean teeth, dietary counseling, tobacco cessations, perio tx & maintenance, xrays, etc
5. All normal duties a dental hygienist would have.
6. Review health history, radiographs, cleaning, pt. ed., instrument ordering
7. X-rays, prophy, pt charting, Cancer Screening, Perio Chart/Maintenance.
8. Perio, xrays, anesthesia at request of Dr., charting, educating.
9. Charting, cleaning, radiographs, planning, routine duties.
10. All above on previous question
11. Routine prophys, sealants, x-rays.
12. Reviewing pt. history, scaling, polishing, taking xrays, caries detection

9. If you are not employed, why not? (Circle all that apply)

a: lack of job availability	0/0	0%
b: family responsibilities	0/0	0%
c: inability to secure employment	0/0	0%
d: low salaries	0/0	0%
e: unsafe working conditions	0/0	0%
f: non-compatible patient care philosophy	0/0	0%
g: lack of benefits	0/0	0%
h: other	0/0	0%

10. Are you working on or interested in an advanced degree? If so, which one?

	Working on		Interested in	
Master	0/12	0%	7/12	58%
DDS	0/12	0%	0/12	0%
PhD	0/12	0%	0/12	0%

11. Are you interested in obtaining an Extended Care Permit (ECP) when you are eligible?

a. yes 8/12 67%
b. no 4/12 33%

If no, please indicate why (check all that apply)

3/4 75% not interested
0/4 0% don't want to work by myself
0/4 0% don't have a sponsoring dentist
1/4 25% other

12. If a mid-level dental practitioner such as the Registered Dental Practitioner became legal in Kansas, would you be interested in pursuing a career in this area of practice?

Yes 12/12 100%
No 0/12 0% If no, please indicate why (check all that apply)

_____ not interested
_____ don't want to work by myself
_____ don't want to obtain additional education
_____ not confident enough in clinical skills yet
_____ other (please write in)

13. Are you planning on continuing your membership to the American Dental Hygienists Association?

Yes 10/12 83% No 2/12 17%

If no, please indicate why (check all that apply)

2/2 100% cost
_____ time commitment
_____ disagree with association policies
_____ don't see value/reason for joining
_____ other

14. Would you encourage someone to attend the WSU Dental Hygiene program?

Yes 12/12 100% No 0/12 0% If no, please indicate why not

Please circle the letter that best indicates your answer: SA = Strongly Agree, A=Agree, D=Disagree, SD=Strongly Disagree

My dental hygiene education at WSU prepared me to:

15. Obtain a complete medical and dental history

SA 12/12 100%
A _____
D _____
SD _____

16. Maintain accurate and complete patient treatment records.

SA	12/12	100%
A		
D		
SD		

17. Recognize medical conditions that require special precautions for dental hygiene treatment.

SA	10/12	83%
A	2/12	17%
D		
SD		

18. Anticipate and manage medical emergencies.

SA	9/12	75%
A	3/12	25%
D		
SD		

19. Perform an extra- and intraoral examination and record findings.

SA	12/12	100%
A		
D		
SD		

20. Perform dental charting and record findings.

SA	11/12	92%
A	1/12	8%
D		
SD		

21. Evaluate the patient's periodontal status and record findings.

SA	11/12	92%
A	1/12	8%
D		
SD		

22. Identify patients with dietary problems.

SA	9/12	75%
A	3/12	25%
D		
SD		

23. Determine the need for referral to other health professional(s).

SA	11/12	92%
A	1/12	8%
D		
SD		

24. Recognize commonly used medications.

SA	9/12	75%
A	3/12	25%
D		
SD		

25. Analyze assessment data to form a dental hygiene diagnosis.

SA	12/12	100%
A		
D		
SD		

26. Actively involve patients in establishing oral health goals.

SA	12/12	100%
A		
D		
SD		

27. Develop a treatment plan for dental hygiene treatment.

SA	12/12	100%
A		
D		
SD		

28. Communicate the treatment plan to the dentist and patient.

SA	12/12	100%
A		
D		
SD		

29. Assist patients in the development of appropriate personal oral health care.

SA	12/12	100%
A		
D		
SD		

30. Utilize educational strategies that promote patient adherence to personal oral health care.

SA	10/12 83%
A	2/12 17%
D	
SD	

31. Utilize standard infection control procedures.

SA	12/12 100%
A	
D	
SD	

32. Expose and process a diagnostic radiographic survey.

Film based

SA	12/12 100%
A	
D	
SD	

Digital

SA	8/12 67 %
A	4/12 33%
D	
SD	

33. Utilize hand and ultrasonic instrumentation as appropriate.

SA	12/12 100%
A	
D	
SD	

34. Administer local anesthetic and nitrous oxide agents.

SA	11/12 92%
A	1/12 8%
D	
SD	

35. Select and administer appropriate chemotherapeutic agents.

SA	10/12 83%
A	2/12 17%
D	
SD	

36. Utilize appropriate body mechanics to minimize work related stress or injury.

SA	9/12 75%
A	3/12 25%
D	
SD	

37. Evaluate the clinical outcomes or success of dental hygiene treatment.

SA	11/12 92%
A	1/12 8%
D	
SD	

38. Determine the patient's satisfaction with dental hygiene care.

SA	12/12 100%
A	
D	
SD	

39. Provide dental hygiene services in a wide variety of community settings.

SA	8/12 67%
A	3/12 25%
D	1/12 8%
SD	

40. Treat patients from varying cultural backgrounds.

SA	12/12 100%
A	
D	
SD	

41. Focus on the welfare and needs of each patient.

SA	11/12 92%
A	1/12 8%
D	
SD	

42. Ensure the privacy of patients and patient records.

SA	12/12 100%
A	
D	
SD	

43. Understand the HIPAA regulations regarding patient privacy and record handling.

SA	10/12 83%
A	2/12 17%
D	
SD	

44. Utilize evidence based decision making to solve clinical practice problems.

SA	11/12 92%
A	1/12 8%
D	
SD	

45. Use peer evaluation experience to evaluate myself and others.

SA	12/12 100%
A	
D	
SD	

46. Interpret and evaluate oral health research.

SA	9/12 75%
A	3/12 25%
D	
SD	

47. Function as a member of the health care team.

SA	12/12 100%
A	
D	
SD	

48. Value the need for life-long learning.

SA	10/12 83%
A	2/12 17%
D	
SD	

49. Value membership in professional organizations.

SA	10/12 83%
A	2/12 17%
D	
SD	

50. Please note any areas in which you would have liked more instruction.

1. More instruction on Eaglesoft.
2. Would of liked to been able to administer anesthesia more often.
3. Less paper charting and more use of dental software.
4. Needed more practice with digital xrays

51. Please make any additional comments you wish to assist us in creating and maintaining excellence in the dental hygiene program.

1. Rules are not enforced equally.
2. Great program with great faculty.
3. I want to thank all the instructors for guiding me to become the best I can be.
4. Some students tended to get special treatment. They did not have to follow the same standards as everyone else and were allowed to slide by.
5. I love the teachers in the dental hygiene program. They have great compassion for what they are doing and work really hard to create a great program for us.

Thanks for your help in assessing the WSU Dental Hygiene Program.

FY 11 (2010) Employer Assessment Survey RESULTS

(TOTAL RESPONSES 2010 WERE 6 OUT OF 34 Surveys)

Beginning of the survey.

1. Is this the first WSU dental hygiene graduate you have employed? (circle one)
   Yes 2/6 = 33%
   No 4/6 = 66%

2. Is this the first dental hygienist you have employed? (circle one)
   Yes
   No 5/5 = 100%

3. Does your office utilize the following equipment or software? (Circle all that apply)
   a. laser caries detection devices such as DiagnoDent 2/6 = 33%
   b. intra-oral camera 5/6 83%
   c. lasers for non-surgical periodontal therapy 2/6 = 33%
   d. computerized patient records 4/6 = 66%
   e. computerized recall system 6/6 = 100%

For the following items, the numbers represent the following values: 5=outstanding, 4=good or above average, 3=average, 2=below average, 1=unsatisfactory, NA=not applicable to my practice

At the time of employment, how well prepared do you think the WSU graduate was to:

1. Record restorative charting.
   5 4/6 = 66%
   4 2/6 = 33%
   3
   2
   1
   NA

2. Perform scaling procedures
   5 5/6 = 83%
   4 1 /6 = 16%
   3
   2
   1
   NA

3. Perform root planing procedures
   5 5/6 = 83%
   4 1/6 = 16%
   3
   2
   1
   NA

4. Perform periodontal probing procedures
   5 5/6 = 83%
   4 1/6 = 16%
   3
   2

1
NA

5. Take quality radiographs
   Film-based
   5 3/5 = 60%
   4 1/5 = 20%
   3
   2
   1
   NA 1/5 = 20%
   Digital
   5 3/5 = 60%
   4 1/5 = 20%
   3
   2
   1
   NA 1/5 = 20%

6. Obtain a complete medical and dental history and recognize medical conditions that require special precautions
   5 3/6 = 50%
   4 3/6 = 50%
   3
   2
   1
   NA

7. Maintain accurate and consistent treatment records
   5 5/6 = 83%
   4 1/6 = 16%
   3
   2
   1
   NA

8. Interpret radiographic images.
   5 4/6 = 66%
   4 2/6 = 33%
   3
   2
   1
   NA

9. Assess patients' needs and develop a comprehensive dental hygiene treatment plan
   5 4/6 = 66%
   4 2/6 = 33%
   3
   2
   1
   NA

10. Provide oral hygiene instructions
    5 5/6 = 83%
    4 1/6 = 16%
    3
    2
    1
    NA

11. Place sealants
    5 5/6 = 83%
    4
    3
    2
    1
    NA 1/6 = 16%

11. Administer local anesthetic
    5 5/6= 83%
    4 1/6 = 16%
    3
    2
    1
    NA

12. Administer and monitor nitrous oxide
    5 5/6 = 83%
    4 1/6 = 16%
    3
    2
    1
    NA

13. Identify patients' oral hygiene needs
    5 5/6 = 83%
    4 1/6 = 16%
    3
    2
    1
    NA

14. Assess patients' scaling and/or root planing needs
    5 5/6 = 83%
    4 1/6 = 16%
    3
    2
    1
    NA

15. Communicate and interact with patients
    5 6/6 = 100%
    4
    3
    2
    1
    NA

16. Communicate and interact with the office dentist(s)
    5 6/6 = 100%
    4
    3
    2
    1
    NA

17. Communicate and interact with the office staff
    5 5/6 = 83%
    4 1/6 = 16%
    3
    2
    1
    NA

18. Demonstrate ethical behavior in dental hygiene practice.
    5 5/6 = 83%
    4 1/6 = 16%
    3
    2
    1
    NA

19. Practice recognized standards of infection control
    5 4/6 = 66%
    4 2/6 = 33%
    3
    2
    1
    NA

20. How would you rate the WSU graduate's overall performance
    5 5/6 = 83%
    4 1/6 = 16%
    3
    2
    1

Do you have any suggestions for additional content to the program or particular skills that students should have upon graduation?

2011 EXIT SURVEY
Wichita State University
Dental Hygiene Department

1. Are you working on or interested in an advanced degree? If so, which one?

	Working on	Interested in	No
Master	0 - 0%	16 - 48.48%	17 - 51.51%
DDS	0 - 0%	12 - 36.36%	21 - 63.63%
PhD	0 - 0%	0 - 0%	33 - 100%

2. Are you interested in obtaining an Extended Care Permit (ECP) when you are eligible?

a. yes 24 - 72.72%
b. no 7 - 21.21%
c. DK 2 - 6.06%

If no, please indicate why (check all that apply)

3 - 42.85%	not interested
2 - 28.57%	don't want to work by myself
1 - 14.28%	don't have a sponsoring dentist
1 - 14.28%	other

3. If a mid-level dental practitioner such as the Advanced Dental Hygiene Practitioner or Oral Health Practitioner became legal in Kansas, would you be interested in pursuing a career in this area of practice?

Yes 27 - 81.81%
No 5 - 15.15%
Maybe 1 - 3.03%

If no, please indicate why (check all that apply)

2	not interested
1	don't want to work by myself
2	don't want to obtain additional education
1	not confident enough in clinical skills yet
3	other (please write in)

4. If a mid-level practitioner program existed when you applied to dental hygiene, would you have chosen a mid-level practitioner program instead of dental hygiene?

Yes 15 - 45.45%
No 14 - 42.42%
Maybe 4 - 12.12%

-OVER-

5. Are you planning on continuing your membership to the American Dental Hygienists Association?

Yes 25 - 75.75% No 8 - 24.24% If no, please indicate why (check all that apply)

7	cost
2	time commitment
	disagree with association policies
4	don't see value/reason for joining
	other

6. Would you encourage someone to attend the WSU Dental Hygiene program?

Yes 33 - 100% No 0 - 0% If no, please indicate why not

7. On a scale of one (very dissatisfied) to five (very satisfied), rate your overall satisfaction with the Dental Hygiene program at WSU:

1	
2	
3	1 - 3.03%
4	11 - 33.33%
5	21 - 63.63%

COMMENTS:

Excellent program. The staff of the DH department are all wonderful instructors in all areas.

Wish we weren't the 1st BSDH class, just because some things were a little not set in stone yet, which made it hard for us.

Love this program!!! Excellent.

I love our DH Program! Our teachers are awesome!

2012 EXIT SURVEY
Wichita State University
Dental Hygiene Department

1. Are you interested in an advanced degree? If so, which one?

	Interested in	No
Master	14/33 42%	17/33 52%
DDS	7/33 21%	20/33 61%
PhD	1/33 3%	20/33 61%

2. Are you interested in obtaining an Extended Care Permit (ECP) when you are eligible?

a. yes 23/33 70%
b. no 4/33 12%
c. DK 6/33 18%

If no, please indicate why (check all that apply)

4/4 100% not interested
_____ don't want to work by myself
_____ don't have a sponsoring dentist
_____ other

3. If a mid-level dental practitioner such as the Registered Dental Practitioner became legal in Kansas, would you be interested in pursuing a career in this area of practice?

Yes 18/33 55%
No 8/33 24%
Maybe 7/33 21%

If no, please indicate why (check all that apply)

4/7 57% not interested
_____ don't want to work by myself
2/7 29% don't want to obtain additional education
1/7 14% not confident enough in clinical skills yet
_____ other (please write in)

4. If a mid-level practitioner program existed when you applied to dental hygiene, would you have chosen a mid-level practitioner program instead of dental hygiene?

Yes 9/33 27%
No 15/33 45%
Maybe 9/33 27%

-OVER-

5. Are you planning on continuing your membership to the American Dental Hygienists Association?

Yes 27/31 87% No 4/31 13%
If no, please indicate why (check all that apply)

2/4 50% cost
_____ time commitment
_____ disagree with association policies
2/4 50% don't see value/reason for joining
_____ other

6. Would you encourage someone to attend the WSU Dental Hygiene program?

Yes 29/31 94% No 2/31 6% If no, please indicate why not

Very unorganized; rules definitely do not apply to each student, seems like it is the 1st year this program occurred; student who cannot graduate with honors were part of the Honor Society even when those with honors were not.

7. On a scale of one (very dissatisfied) to five (very satisfied), rate your overall satisfaction with the Dental Hygiene program at WSU:

1 1/31 3%
2 _____
3 3/31 10%
4 17/31 55%
5 10/31 32%

COMMENTS:

1. Program seemed unorganized throughout the 2 years. This program needs to be regulated often. I feel some people did not deserve to be here and were easily passed along these courses. There were also some students who were treated differently and lazy in clinic and were never addressed about it by an instructor even though other students complained.
2. Wonderful program and staff. ___ has favorites.. very obvious.
3. Loved the program! Great instructors, learned so much from all of them.
4. The program was very unorganized & inconsistent. I feel that I got a very good educations, but it was made more stressful than necessary. Some instructors were not very professional & would favor certain students. It was ridiculous the amount of papers to be done the last semester to prepare us for our masters. We are all ready to just get out & work in what we went to school for now, not worrying about our masters yet.
5. It was unorganized most of the program.
6. Lacked some organization. Not all teachers were on the same page. There was some

inappropriate teacher-student relationships during the program. Also, there should be the enforcement of the no tolerance cheating policy.

7. The program was very expensive & I felt like we constantly had to purchase more & more things as the program went on.
8. At the time the program seemed a little unorganized.
9. There have definitely been ups and downs and times where I thought the program could have been more organized but when I go out and meet students from other schools, I can definitely see that this is a great program and our education will be recognized in the field as quality training.
10. Overall I feel that I have received a good education here at WSU. I do however have a few concerns w/ the program. My main concern is how unorganized everything is and how the clinical instructors are never on the same page. A lot of the classes were unorganized. A lot of the instructors sit in front of a PowerPoint, read them word for word, I feel that I could have taught myself better than some of the instructors by just reading the book or PowerPoint's at home. Also, all the papers were a joke, all busy work in my mind. I think I wrote 3 access to care papers. We mentioned our concerns to instructors & it seemed like they didn't get it. I think that the class issues needs to be removed from the program, biggest waste of time! Those are my main concerns, overall I am happy w/ the education I received.

2013 EXIT SURVEY
Wichita State University
Dental Hygiene Department

1. Are you interested in an advanced degree? If so, which one?

	Interested in	No
Master	20/32 63%	12/32 38%
DDS	9/32 28%	23/32 72%
PhD	1/32 3%	31/32 97%

2. Are you interested in obtaining an Extended Care Permit (ECP) when you are eligible?

a. yes 20/32 63%
b. no 2/32 6%
c. DK 10/32 31%

If no, please indicate why (check all that apply)

2/32 6%	not interested
1/32 3%	don't want to work by myself
0/32 0%	don't have a sponsoring dentist
1/32 3%	other

3. If a mid-level dental practitioner such as the Registered Dental Practitioner became legal in Kansas, would you be interested in pursuing a career in this area of practice?

Yes 20/32 63%
No 3/32 9%
Maybe 9/32 28%

If no, please indicate why (check all that apply)

3/3 100%	not interested
2/3 67%	don't want to work by myself
1/3 33%	don't want to obtain additional education
2/3 67%	not confident enough in clinical skills yet
0/3 0%	other (please write in)

4. If a mid-level practitioner program existed when you applied to dental hygiene, would you have chosen a mid-level practitioner program instead of dental hygiene?

Yes 5/32 16%
No 10/32 31%
Maybe 17/32 53%

-OVER-

5. Are you planning on continuing your membership to the American Dental Hygienists Association?

Yes 2/32 6% No 4/32 13% If no, please indicate why (check all that apply)

3/4 75%	cost
1/4 25%	time commitment
0/4 0%	disagree with association policies
0/4 0%	don't see value/reason for joining
1/4 25%	other

6. Would you encourage someone to attend the WSU Dental Hygiene program?

Yes 32/32 100% No 0/32 0% If no, please indicate why not

7. On a scale of one (very dissatisfied) to five (very satisfied), rate your overall satisfaction with the Dental Hygiene program at WSU:

1	0/32 0%
2	0/32 0%
3	4/32 13%
4	17/32 53%
5	11/32 34%

COMMENTS:

Finding patients for clinic requirements was a huge issue. I had to over come by paying over $300.00 for services I need to perform to graduate. I still got marked down a letter grade because I couldn't get everything finished in the junior yr.

Disorganization of instructors adds a lot of stress to us as students. Much of our grade in clinic is dependent on things that are out of our control. Many people ask me and are surprised to hear that the school doesn't help us find jobs.

One of the only modifications that I would make is the cost of the initial supplies. Purchasing our own glasses (for patients), bib clips, xcp, etc. seems a little excessive. Maybe just throw that in as an overall fee & just have it taken care of of. Oh, gloves & masks too.

I think more should be done about students missing class. There are several repeat offenders who receive no negative consequences.

Great program and faculty!!

WSU Department of Dental Hygiene Case Analysis Rubric

Criteria	4 A-level qualities (90–100)	3 B-level qualities (80–89)	2 C-level qualities (70–79)	1 F-level qualities (below 70)
Completeness	Complete in all respects; reflects all requirements	Complete in most respects; reflects most requirements	Incomplete in many respects; reflects few requirements	Incomplete in most respects; does not reflect requirements
Understanding	Demonstrates a sophisticated understanding of the topic(s) and issue(s)	Demonstrates an accomplished understanding of the topic(s) and issue(s)	Demonstrates an acceptable understanding of the topic(s) and issue(s)	Demonstrates an inadequate understanding of the topic(s) and issue(s)
Analysis	Presents an insightful and thorough analysis of all information pertaining to the patient's case	Presents an effective analysis of all information pertaining to the patient's case	Presents a superficial analysis of all information pertaining to the patient's case	Presents an incomplete analysis of all information pertaining to the patient's case
Application	Makes appropriate and powerful connections between the case featured and the concepts studied in the literature	Makes appropriate connections between the case featured and the concepts studied in the literature	Makes appropriate but somewhat vague connections between the case featured and concepts studied in the literature	Makes little or no connection between the case featured and the concepts studied in the literature
Writing mechanics	Writing demonstrates a sophisticated clarity, conciseness, and correctness; includes thorough details and relevant, appropriate evidence and information; extremely well-organized	Writing is accomplished in terms of clarity and conciseness and contains only a few errors; includes sufficient details and relevant, appropriate evidence and information; well-organized	Writing lacks clarity or conciseness and contains numerous errors; gives insufficient detail and lacks relevant evidence and information; lacks organization	Writing is unfocused, rambling, or contains serious errors; lacks detail and relevant evidence and information; poorly organized
Evidence	All the references used are important, and are of good/scholarly quality. There are an appropriate number of scholarly resources that are used effectively in the essay. All the references are effectively used, correctly cited and correctly listed in the reference list according to APA style	Most of the references used are important, and are of good/scholarly quality. There are appropriate number of scholarly resources that are for the most part used effectively in the essay. Most of the references are effectively used, correctly cited and correctly listed in the reference list according to APA style	Most of the references used are not important, and/or are not of good/scholarly quality. There are NOT an appropriate number of scholarly resources, and/or they are not used effectively in the essay. References are not effectively used, and/or correctly cited and/or correctly listed in the reference list according to APA style	No references provided

GRADE SCALE:

Point Value	Grading/Percentage	
22-24	A	(93-100%)
21-20	A-	(90-92%)
19-18	B+	(87-89 %)
17-16	B	(83-86%)
15-14	B-	(80-82%)
13-12	C+	(77-79%)
11-10	C	(76-73%)
9-8	C-	(72-70%)
7-6	D+	(69-67%)
4-5	D	(66-63%)
3 or less	F	(below 62%)

Faculty may award full or half points.

WICHITA STATE UNIVERSITY
DENTAL HYGIENE CLINIC
PATIENT SATISFACTION SURVEY

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Thank you for your help.

Fall 2010/Spring 2011 Date

Please check the appropriate space.

1st visit to the clinic	__67___53%
Patient for 1-2 years	__26___21%
Patient for 3-4 years	__12___9%
Patient for 5+ years	__21___17%

I found out about the clinic from:

__53__41%_	friend	__38__30%_	student
__1_1%__	poster	__6__1%_	faculty
__0___	brochure		
__34__27%_	other – please list		

Dr. office, Internet, Dentist Assistant, Wife, Dentist, Sudent Health, Phone Book, Newspaper, Orientation.

Please check the box that best describes your opinion.

Strongly Agree (SA) **Agree (A)** **Disagree (D)** **Strongly Disagree (SD)** **Don't Know/NA (NA)**

	SA	A	D	SD	NA
1. I was satisfied with the care provided by the student dental hygienist.	☐90% 116	☐10% 12	☐	☐	☐
2. I felt the dental hygiene instructor supervised the student well.	☐89% 115	☐9% 12	☐2% 1	☐	☐
3. I was satisfied with the examination by the dentist.	☐86% 108	☐12% 15	☐	☐	☐2 2
4. The student respected me as an individual.	☐95% 121	☐5% 12	☐	☐	☐
5. The student exhibited courteous and professional behavior.	☐95% 122	☐5% 6	☐	☐	☐
6. The student used words I could understand and/or explained things well.	☐93% 119	☐5% 7	☐1% 1	☐1% 1	☐

(over)

	SA	A	D	SD	NA
7. The student clearly explained how to keep my mouth healthy.	☐92% 118	☐7% 9	☐2% 1	☐	☐
8. The student explained what was going to happen before each procedure.	☐92% 117	☐8% 10	☐	☐	☐
9. The student was sensitive to my physical comforts during my appointment.	☐95% 122	☐5% 6	☐	☐	☐
10. The student inquired about my level of dental knowledge before providing me with patient education.	☐82% 105	☐12% 15	☐2% 3	☐	☐4 5
11. Overall, I was pleased with the care I received at the Wichita State University Dental Hygiene Clinic.	☐94% 121	☐6% 8	☐	☐	☐
12. I would recommend dental hygiene treatment at the clinic to a friend or relative.	☐95% 122	☐5% 7	☐	☐	☐

Additional Comments:

This information will be kept in confidential files.

Dental Hygiene Clinic
Wichita State University
1845 N Fairmount
Wichita KS 67260-0144

1. DH was great!!!
2. Better than any dentist office. Thank you
3. Yea!!
4. Great Work!
5. DH did a great job explaining to me how to exactly use the perio aids. The instructor was roung in stretching and pulling my lips. Also resting all her hands weight on my front teeth. She should have noticed I have 4 crowns on the front. My previous cleaning in April had the same experience with the instructors as well. Please tell the instructors we are humans so they can stretch our lips gently.
6. Very professional very sincere with care of my teeth
7. Would like to thank the ladies who watched my kids. Awesome job ladies!
8. Student asked me to turn this way. This is unclear. Instead, give direction such as turn right or turn left.
9. The student put in a lot of effort. She was very nice and worked very hard
10. I requested __ for my next visit.

11. Everything great, extra care and effort. Shown for proper use of sonic care, flossing—student went out of her way to explain home techniques.
12. I always been like the program since I started coming here.
13. Keep going please! Thank you!
14. She was sweet throughout and had a great bedside manor.
15. I think they did a great job.
16. Both times I have visited the clinic I was very happy with the service and how they paid attention to painful areas in my mouth. Very happy!
17. In fact, I have recommended info to a lot of people.
18. So glad the clinic is available.
19. Always have a great dental cleaning
20. Great experience and people working with me
21. Didn't know it would take 2 appointments for cleaning. Took a little longer than I thought it would.
22. Very satisfied with my treatment today.
23. Very professional and very happy with experience
24. __ did a great job. Will keep seeing her.
25. I was overall very pleased with my first visit.
26. __ gave excellent service and was very courteous. She explained all procedures. Great student. Dr. ___ was professional and helpful in recommending further dental needs. ___ at payment desk was polite and pleasant. Overall service was fantastic.
27. Very appreciative of anesthesia and made sure I was comfortable due sensitivity.
28. Satisfaction = A++++
29. Great program!
30. __ did a great job!
31. Other than being cold, everything was fine.
32. __Rocks! Thank you!
33. Excellent service!
34. Great Job!
35. __was awesome!

WICHITA STATE UNIVERSITY
DENTAL HYGIENE CLINIC
PATIENT SATISFACTION SURVEY

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108 surveys were completed. Several boxes were left blank. **Fall 2011 / Spring 2012**

Please check the appropriate space.

1st visit to the clinic _50_____
Patient for 1-2 years _17_____
Patient for 3-4 years _13_____
Patient for 5+ years _11_____
"?" _1_____

I found out about the clinic from: _46____ friend ___33__ student
_0____ poster __4___ faculty
_1____ brochure
_12____other – please list

Mother (2x), interenet, dental tech, former student (4x), made phone call, health insurance seminar, sister, husband (2x), health dept. clinic, Starkey Inservice Educator, Dr. Davir office, Cambridge Dental, dentist (2x), Don't remember

Please check the box that best describes your opinion.

Strongly Agree (SA) **Agree (A)** **Disagree (D)** **Strongly Disagree (SD)** **Don't Know/NA (NA)**

	SA	A	D	SD	NA
1. I was satisfied with the care provided by the student dental hygienist.	☐94% 102	☐6% 6	☐ 0	☐ 0	☐ 0
2. I felt the dental hygiene instructor supervised the student well.	☐96% 98	☐8% 9	☐.9% 1	☐ 0	☐ 0
3. I was satisfied with the examination by the dentist.	☐92% 99	☐5% 6	☐.9% 1	☐ 0	☐1% 2
4. The student respected me as an individual.	☐97% 105	☐3% 3	☐ 0	☐ 0	☐ 0
5. The student exhibited courteous and professional behavior.	☐100% 108	☐ 0	☐ 0	☐ 0	☐ 0
6. The student used words I could understand and/or explained things well.	☐96% 104	☐3% 3	☐.9% 1	☐ 0	☐ 0

(over)

Only 103 surveys had the back side completed!	SA	A	D	SD	NA
7. The student clearly explained how to keep my mouth healthy.	☐92% 95	☐5% 5	☐ 0	☐ 0	☐ 3
8. The student explained what was going to happen before each procedure.	☐89% 92	☐10% 10	☐ 0	0	☐.9% 1
9. The student was sensitive to my physical comforts during my appointment.	☐94% 97	☐6% 6	☐ 0	☐ 0	☐ 0
10. The student inquired about my level of dental knowledge before providing me with patient education.	☐82% 84	☐17% 17	☐ 0	☐ 0	☐2% 2
11. Overall, I was pleased with the care I received at the Wichita State University Dental Hygiene Clinic.	☐93% 96	☐7% 7	☐ 0	☐ 0	☐ 0
12. I would recommend dental hygiene treatment at the clinic to a friend or relative.	☐96% 99	☐4% 4	☐ 0	☐ 0	☐ 0

Additional Comments:

1. Thank you __ for a job well done, as well as your professionalism and wonderful bedside manner!!
2. Great care!
3. I am well pleased.
4. Thank you!
5. ___ did great.
6. Great Student. Real nice.
7. I have told many people about this clinic. I say it is Wichita's "best kept secret!" I've been coming here since 1997 (every 6 months) ___ is a great student!
8. I'm pleased, I will be back.
9. One of the best cleanings I've had.
10. Great Work ___. 5 years without a cleaning and she got them spick & span.
11. I'll be back!!!
12. I thought __ did a really good job and best polishing. I will ask 4 her again.
13. I don't see how anyone would go anywhere else. This place is the best!
14. ___ was extremely gentle, professional, and will make an excellent hygienist.
15. My visit and ___'s care was excellent.
16. ___ is the best!
17. The only drawback is the time involved, but the payoff is the thorough dental care and low cost. Thank you!
18. Very Good!
19. ___ treated me with TLC. She will go very far in her career. She made me feel relaxed and was very patient with my difficult procedure. A++!
20. My teeth feel very clean and it was pain free.
21. I am really happy with the clinic and tell everyone I know about it.

22. I always had considerate care here.
23. Great job __!!
24. Thanks
25. Good job
26. Very pleasant experience!
27. Great!
28. Excellent Care!
29. Very happy I came here and honestly didn't know this was open to the public until this student informed me. Good to know and will spread the word =)
30. __ was extremely professional and handled this examination very well. She was also very calm the entire time, which made me feel that much more comfortable.
31. __ is the best!
32. She did great!
33. I received excellent care, and a lot of helpful information. Very impressed with the outcome of how my mouth and teeth feel now. I am going to recommend everyone I know. Definitely need a better way to advertise besides word of "mouth." ←Ha! Well worth the amount of time it took!
34. Super job =)
35. Very pleasant!
36. Thanks
37. Great friendly service

This information will be kept in confidential files.

Dental Hygiene Clinic
Wichita State University
1845 N Fairmount
Wichita KS 67260-0144

WICHITA STATE UNIVERSITY
DENTAL HYGIENE CLINIC
PATIENT SATISFACTION SURVEY

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Thank you for your help.

___Fall 2012/Spring 2013_____ Date

Please check the appropriate space.

1st visit to the clinic	__56__54%___
Patient for 1-2 years	__27__26%___
Patient for 3-4 years	__13__12.5%___
Patient for 5+ years	__8____7.5%_

Other:

- Family x6
- Armfield Dent. Clinic Augusta Ks
- VA Dentist
- Regular Dentist x2
- Online x2
- Former Student
- Neighbor
- Health Convention (Century II)
- Palmer Dental Clinic

I found out about the clinic from:	_44__41.5%__	friend	_42__39.5%__ student
	__0__0%_	poster	_4___3%_ faculty
	__0__0%_	brochure	
	_17__16%__	other – please list	

Please check the box that best describes your opinion.

Strongly Agree (SA) **Agree (A)** **Disagree (D)** **Strongly Disagree (SD)** **Don't Know/NA (NA)**

		SA	A	D	SD	NA
1.	I was satisfied with the care provided by the student dental hygienist.	☐94% 100	☐6% 6	☐	☐	☐
2.	I felt the dental hygiene instructor supervised the student well.	☐90.5% 96	☐9.5% 10	☐	☐	☐
3.	I was satisfied with the examination by the dentist.	☐86% 91	☐9.5% 10	☐	☐1% 1	☐4% 4
4.	The student respected me as an individual.	☐98% 104	☐2% 2	☐	☐	☐
5.	The student exhibited courteous and professional behavior.	☐96% 102	☐4% 4	☐	☐	☐
6.	The student used words I could understand and/or explained things well.	☐90.5% 96	☐9.5% 10	☐	☐	☐

(over)

	SA	A	D	SD	NA
7. The student clearly explained how to keep my mouth healthy.	☐87% 92	☐10% 11	☐	☐	☐
8. The student explained what was going to happen before each procedure.	☐87% 92	☐10% 11	☐	☐	☐
9. The student was sensitive to my physical comforts during my appointment.	☐91.5% 97	☐5.5% 6	☐	☐	☐
10. The student inquired about my level of dental knowledge before providing me with patient education.	☐81% 86	☐12% 13	☐ 3	☐	☐1% 1
11. Overall, I was pleased with the care I received at the Wichita State University Dental Hygiene Clinic.	☐92.5% 98	☐5% 5	☐	☐	☐
12. I would recommend dental hygiene treatment at the clinic to a friend or relative.	☐91.5% 97	☐5% 5	☐	☐1% 1	☐

Additional Comments:

1. The dental hygienist did a great job. Her advisor also was very good as well.
2. The dental hygienist was very thorough. My mouth went through WWIII. LOL!
3. I love the dental hygienist. She is the best! So sweet! I love her cats. Meow meow.
4. The dental hygienist was as thorough as my regular hygienist! (Maybe more!)
5. Thanks for everything!
6. Great work with great students and supervisors and dentist too. Thanks!
7. My dental hygienist was absolutely fantastic!
8. I don't see why people should have to pay for such novice experienced students to do multiple hour long procedures. Other than that the service was good. I just wouldn't recommend it to anyone for the price.
9. You did a great job- might work on time- but overall great job
10. Further explanation of terminology would be helpful, in general.
11. My dental hygienist was great. I already texted my roommates to refer them. Will definitely return
12. Thank you!
13. She did really well ☺
14. My dental hygienist was great!
15. I had a pleasant time during my visit.
16. The dental hygienist was excellent!
17. Great
18. Exceptional Treatment
19. The hygienist was knowledgeable and personable. It was a wonderful experience. I enjoyed it. I was inspired to take better care of my teeth.
20. Always I feel I received a good cleaning
21. My experience was very good!
22. Very pleased! Thank you ☺
23. Student was the best yet. I have been here several times.
24. Wonderful care- highly recommend. Very professional and friendly!
25. My hygienist did a FANTASTIC and WONDERFUL job. Excellent work!! She will make a GREAT hygienist!!!! ☺
26. Thank you ☺
27. Great job.

28. Excellent program- very nice and professional student.
29. Loved having my niece provide this service- very impressed with the whole experience!
30. My dental hygienist did and AWESOME job! ☺
31. Thank you
32. Very well done!! My 5 year old enjoyed his teeth cleaning!!
33. My hygienist is very thorough and yet gentle ☺
34. My hygienist is amazing. Very thorough and caring about our comfort and questions are always answered. Thank you for the opportunity to be a patient! ☺
35. Seems to be a great program. I am very thankful my daughter is in this program @ WSU ☺
36. Best cleaning ever!
37. Thank you! It was great ☺
38. Thank you for everything ☺
39. Best ever! Keep up the good work, dental hygiene students.
40. The best job since coming to the clinic.
41. Excellent experience. My dental hygienist was kind and educational and truly seemed to enjoy what she is doing!

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Dental Hygiene Clinic
Wichita State University
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Dental Hygiene Degree Completion Learning Outcomes Document

Learning Outcomes	Assessment Tools (portfolios, rubrics, exams)	Target/Criteria (desired program level achievement)	Results	Analysis
Communication – the graduate is able to effectively impart and exchange information in written and electronic formats.	Rubric	Graduates will perform at the 85% or B level.		
Critical Thinking – the graduate uses a process of actively and skillfully conceptualizing, applying, analyzing, synthesizing, and/or evaluating information gathered from, or generated by observation, experience, reflection, reasoning or communication as a guide to belief and action.	Rubric	Graduates will perform at the 85% or B level.		
Health Promotion – the graduate supports strategies that promote the oral and overall health of the individual, family, and/or community.	Rubric	Graduates will perform at the 85% or B level.		
Lifelong learning: the graduate fosters lifelong professional development in self and others.	Self-assessment survey.	85% of graduates will report being prepared to pursue advanced professional roles/endeavors such as graduate education, teaching or alternate practice.		

WSU BSDH Completion Degree Critical Thinking Rubric

Criteria	Strong 4 -- Consistently does all or almost all of the following	Acceptable 3 -- Does most or many of the following:	Weak 2-- Consistently does all or almost all of the following:	Unacceptable 1 -- Does most or many of the following:
Critical Thinking	• Accurately interprets evidence, statements, graphics, questions, etc. • Identifies the most important arguments (reasons and claims) pro and con. • Thoughtfully analyzes and evaluates major alternative points of view. • Draws warranted, judicious, non-fallacious conclusions. • Justifies key results and procedures, explains assumptions and reasons. • Fair-mindedly follows where evidence and reasons lead.	• Accurately interprets evidence, statements, graphics, questions, etc. • Identifies relevant arguments (reasons and claims) pro and con. • Offers analyses and evaluations of obvious alternative points of view. • Draws warranted, non-fallacious conclusions. • Justifies some results or procedures, explains reasons. • Fair-mindedly follows where evidence and reasons lead.	• Misinterprets evidence, statements, graphics, questions, etc. • Fails to identify strong, relevant counter-arguments. • Ignores or superficially evaluates obvious alternative points of view. • Draws unwarranted or fallacious conclusions. • Justifies few results or procedures, seldom explains reasons. • Regardless of the evidence or reasons, maintains or defends views based on self-interest or preconceptions.	• Offers biased interpretations of evidence, statements, graphics, questions, information or the points of view of others. • Fails to identify or hastily dismisses strong, relevant counter-arguments. • Ignores or superficially evaluates obvious alternative points of view. • Argues using fallacious or irrelevant reasons, and unwarranted claims. • Does not justify results or procedures, nor explain reasons. • Regardless of the evidence or reasons, maintains or defends views based on self-interest or preconceptions. • Exhibits close-mindedness or hostility to reason.

Adapted from: http://www.insightassessment.com/Products/Rubrics-Rating-Forms-and-Other-Tools/Holistic-Critical-Thinking-Scoring-Rubric-HCTSR

WSU BSDH Completion Degree Health Promotion Rubric

Criteria	Strong 4 -- Consistently does all or almost all of the following:	Acceptable 3 -- Does most or many of the following:	Weak 2-- Consistently does all or almost all of the following:	Unacceptable 1 -- Does most or many of the following:
Health Promotion	• Applies *appropriate* and *powerful* health education, counseling and promotion theories/interventions to achieve positive health behaviors in individuals, families, and/or communities. • Includes *sophisticated* consideration for age, developmental stage, special need, culture & ethnicity, health history, interprofessional needs, and available resources.	• Applies *appropriate* health education, counseling and promotion theories/interventions to achieve positive health behaviors in individuals, families, and/or communities. • Includes *accomplished* consideration for age, developmental stage, special need, culture & ethnicity, health history, interprofessional needs, and available resources.	• Applies *appropriate but somewhat vague* health education, counseling and promotion theories/interventions to achieve positive health behaviors in individuals, families, and/or communities. • Includes *acceptable* consideration for age, developmental stage, special need, culture & ethnicity, health history, interprofessional needs, and available resources.	• Applies *inadequate* health education, counseling and promotion theories/interventions to achieve positive health behaviors in individuals, families, and/or communities. • Includes *little or no consideration* for age, developmental stage, special need, culture & ethnicity, health history, interprofessional needs, and available resources.

Adapted from: http://www.adha.org/resources-docs/72612_ADHP_Competencies.pdf

WSU BSDH Completion Degree Written Communication Rubric

Definition: Written communication is the development and expression of ideas in writing. Written communication involves learning to work in many genres and styles. It can involve working with many different writing technologies, and mixing texts, data, and images. Written communication abilities develop through iterative experiences across the curriculum.

Criteria	Strong 4 -- Consistently does all or almost all of the following:	Acceptable 3 -- Does most or many of the following:	Weak 2-- Consistently does all or almost all of the following:	Unacceptable 1 -- Does most or many of the following:
Context of and Purpose for Writing *Includes considerations of audience, purpose, and the circumstances surrounding the writing task(s).*	•Demonstrates a thorough understanding of context, audience, and purpose that is responsive to the assigned task(s) and focuses all elements of the work.	•Demonstrates adequate consideration of context, audience, and purpose and a clear focus on the assigned task(s) (e.g., the task aligns with audience, purpose, and context).	•Demonstrates awareness of context, audience, purpose, and to the assigned tasks(s) (e.g., begins to show awareness of audience's perceptions and assumptions).	•Demonstrates minimal attention to context, audience, purpose, and to the assigned tasks(s) (e.g., expectation of instructor or self as audience).
Content Development	•Uses appropriate, relevant, and compelling content to illustrate mastery of the subject, conveying the writer's understanding, and shaping the whole work.	•Uses appropriate, relevant, and compelling content to explore ideas within the context of the discipline and shape the whole work.	•Uses appropriate and relevant content to develop and explore ideas through most of the work.	•Uses appropriate and relevant content to develop simple ideas in some parts of the work.
Sources and Evidence	•Demonstrates skillful use of high-quality, credible, relevant sources to develop ideas that are appropriate for the discipline and genre of the writing	•Demonstrates consistent use of credible, relevant sources to support ideas that are situated within the discipline and genre of the writing.	•Demonstrates an attempt to use credible and/or relevant sources to support ideas that are appropriate for the discipline and genre of the writing.	•Demonstrates an attempt to use sources to support ideas in the writing.
Control of Syntax and Mechanics	•Uses graceful language that skillfully communicates meaning to readers with clarity and fluency, and is virtually error-free.	•Uses straightforward language that generally conveys meaning to readers. The language in the portfolio has few errors.	•Uses language that generally conveys meaning to readers with clarity, although writing may include some errors.	•Uses language that sometimes impedes meaning because of errors in usage.

Adapted from: value@aacu.org

Self-Assessment Survey of Lifelong Learning
Degree Completion Wichita State University

After completing the course work at WSU, I rate myself on a scale of 1-5 in the following areas:

5=strongly agree 4=agree 3= no change 2= disagree 1= strongly disagree

	5	4	3	2	1
I have changed my understanding of the field and my role in the field of dental hygiene					
I am more prepared for real life dental hygiene practice					
I have an increased confidence in my abilities as a hygienist					
I understand the importance of continually updating my skills and experience.					
I am better prepared to pursue advanced professional roles in at least one area below **a. Graduate education** **b. Teaching in the field of dental hygiene** **c. Alternate practice**					

Comments: Please add any additional comments for each section of professional growth and development and what specifically helped in your growth while completing your BSDH at Wichita State University.

1. Changed my understanding of the field and my role in the field of dental hygiene

2. More prepared for real life dental hygiene practice

3. Increased confidence in my abilities as a hygienist

4. Understand the importance of continually updating my skills and experience.

5. Prepared to pursue advanced professional roles
    a. Graduate education

    b. Teaching in the field of dental hygiene

    c. Alternate practice

2011 Assessment Report
2010-2011 Academic Year
Dental Hygiene Program

Program Goals: 1) Provide a Bachelor of Science in Dental Hygiene in this geographic area which will attempt to meet societal needs. 2) Provide educational experiences which will enable program graduates to achieve licensure as a dental hygienist in any state.

Program Objectives	Assessment Methods/Data	Responsibility	Results/Changes
Maintain a quality accredited curriculum consistent with the Program mission, vision and values.	The program will conduct program and curriculum review annually to include: -accreditation annual reports and site visits	Dept. Chair	Completed Annual Accreditation Report. Department engaged in a Strategic Planning Session during late Spring/Summer to develop a 2-3 year plan for future directions of the program.
Document regular assessment and modification of the curriculum and program.	The program will conduct program and curriculum review annually to include: -course evaluations -graduate surveys -employer surveys (every 2-3 yrs.) -graduation rates -quality assurance review of clinic	Dept. Chair & Faculty	Annual program and curriculum review were completed. See individual reports for detail. (Quality Assurance Plan, National Boards, Clinical Boards)
Review and monitor board performance with results expected to be at or above the regional or national average.	Review board performance on written and clinical board examinations.	Dept. Chair & Faculty	**2010 Graduates:** **Written boards** – 97% 1st time pass rate. National average is 96.3%. **Clinical boards** – 94.1% 1st time pass rate. Regional average is 88.51%. Performance is good on clinical boards. Discuss with student the policies for Board screening at the beginning of the Spring semester.
Maintain student, faculty, and Program policies as required by CODA and WSU.	Review student, faculty, and clinic records for compliance with policies.	Dept. Chair, Office Specialist, Clinic Manager, and Faculty	Student and clinic patient records must be locked at the end of every day.

Student Objectives	Assessment Methods/Data	Responsibility	Results/Changes
Students will obtain the academic and	Review of individual courses. Review	Dept. Chair & Faculty	See detailed information at end of report.

clinical foundation required to practice as a member of the dental team which develops and implements comprehensive dental hygiene care.	of student course completion. Review of student completion of all clinical competencies.		
Students will successfully complete the National Board Examination.	Review National Board results.	Dept. Chair & Faculty	97% 1st time pass rate. National average is unknown.
Students will successfully complete a clinical board examination.	Review of clinical board examination results.	Dept. Chair & Faculty	94.1% 1st time pass rate. Regional average is 88.51%. Performance is good on clinical boards. Discuss with student the policies for Board screening at the beginning of the Spring semester.
Students will have an appropriate level of knowledge of dental hygiene practice as assessed by their employer.	Review of employer surveys every 2-3 years.	Dept. Chair & Faculty	Very low response rate – 6 returns. Discussed different mechanisms for increasing returns – decided to try calling new graduate and getting employer contact information and mail survey directly to employer. Add the following questions:1) How long have you been in practice 2) what type of practice do you have; general, periodontal, FQHC, 3) questions on critical thinking, problem solving, and team player.
Students will have an appropriate level of knowledge of dental hygiene practice as self-assessed by graduates.	Review of annual graduate survey.	Dept. Chair & Faculty	Of 13 respondents, 100% were employed. Anecdotal comments indicate difficulty in finding employment in the area at full-time levels. Deleted question on managing a recall system due to widespread use of dental software.
Students will have an acceptable level of satisfaction with the program as self-assessed just prior to graduation.	Review of annual Exit Survey.	Dept. Chair & Faculty	First year for Exit Survey. Positive results – no changes needed

Curriculum Review

DH 311 – Preclinic

Added ultrasonic introduction of standard tip; continue focus on calculus removal
Add Air Polisher requirement to fall Senior Clinic

DH 319 - Dental Materials

Restoration needs and evaluation; is this too early?
Consider patient scenarios on toothache

DH 317 – Radiology

No changes

DH 318 - Anatomy & Histology

Investigating co-teaching this course with CSD

DH 331 – Concepts i

Increased use of learning activities from dentalcare.com

DH 332 – Clinic I

Moved feedbacks and competencies between Spring and Summer
Added Sealant, ultrasonic, and sharpening feedback

DH 314 – Periodontics

Added more learning activities to course
Increase case typing activities

DH 334 – Research

1st year of experiment in Interprofessional education with Nursing student (Evidence Based Practice)
Need additional feedback from nursing faculty and DH students
DH faculty felt it was good interprofessional experience

HS 315 – Head & Neck

Exploring interprofessional course of Dental Anatomy, Head & Neck Anatomy and Oral Embryology with CSD.

DH 333 – Clinic II

Move Diagnodent to Spring
Students commented they need 3 credit hours for Financial Aid for summer

DH 431 – Concepts II

Discussed teaching old or new premed guidelines for Board preparation
Added Autistic observation for all
Interested in HIV testing in clinic; Kelly will investigate

DH 434 – Clinic III

Add Hb1c to diabetes questions and blood sugar
Need to reschedule nitrous feedback
Add DiagnoDent to Sealant Feedback/Competency form

DH 416 – Pain Management

Can it be taught in 8 weeks so earlier opportunity for administration by students

DH 410 – Community I

Complete textbook in 1st semester; moveing to hygbrid in Fall ’11 – 50% on-line; 50% in class

DH 470 – Issues

Consider 2 credit hours
Liked Cultural Competence unit

DH 432 – Concepts III

Consider Panopto recording of DDS presentations
Possible additional topics – ergonomics, Cerac crowns

DH 435 – Clinic IV

Student struggle to identify board patients

DH 407 – Ethics

Used new textbook
Added fluoride debate to learning activities

DH 440 – Community II

Screening events fell through
Increase service learning activities next year – sealants, prophys?
Need to make sure in compliance with accreditation and KBDE requirements for such activities

2012 Assessment Report
2011-2012 Academic Year
Dental Hygiene Program

Program Goals: 1) Provide a Bachelor of Science in Dental Hygiene in this geographic area which will attempt to meet societal needs. 2) Provide educational experiences which will enable program graduates to achieve licensure as a dental hygienist in any state.

Program Objectives	Assessment Methods/Data	Responsibility	Results/Changes
Maintain a quality accredited curriculum consistent with the Program mission, vision and values.	The program will conduct program and curriculum review annually to include: -accreditation annual reports and site visits	Dept. Chair	Completed Annual Accreditation Report.
Document regular assessment and modification of the curriculum and program.	The program will conduct program and curriculum review annually to include: -course evaluations -graduate surveys -employer surveys (every 2-3 yrs.) -graduation rates -quality assurance review of clinic	Dept. Chair & Faculty	Annual program and curriculum review were completed. See individual reports for detail. (Quality Assurance Plan, National Boards, Clinical Boards)
Review and monitor board performance with results expected to be at or above the regional or national average.	Review board performance on written and clinical board examinations.	Dept. Chair & Faculty	**2011 Graduates:** **Written boards** – 97% 1st time pass rate. National average was never provided by NBDHE. **Clinical boards** – 94.1% 1st time pass rate. Regional average is 88.51%. Performance is good on clinical boards.
Maintain student, faculty, and Program policies as required by CODA and WSU.	Review student, faculty, and clinic records for compliance with policies.	Dept. Chair, Office Specialist, Clinic Manager, and Faculty	See Quality Assurance Report for clinical record review.

Student Objectives	Assessment Methods/Data	Responsibility	Results/Changes
Students will obtain the academic and	Review of individual courses. Review	Dept. Chair & Faculty	See detailed information at end of report.

clinical foundation required to practice as a member of the dental team which develops and implements comprehensive dental hygiene care.	of student course completion. Review of student completion of all clinical competencies.		
Students will successfully complete the National Board Examination.	Review National Board results.	Dept. Chair & Faculty	**2011 Graduates:** **Written boards** – 97% 1st time pass rate. National average was never provided by NBDHE.
Students will successfully complete a clinical board examination.	Review of clinical board examination results.	Dept. Chair & Faculty	**2011 Clinical boards** – 94.1% 1st time pass rate. Regional average is 88.51%. Performance is good on clinical boards.
Students will have an appropriate level of knowledge of dental hygiene practice as assessed by their employer.	Review of employer surveys every 2-3 years.	Dept. Chair & Faculty	NA for 2011-12
Students will have an appropriate level of knowledge of dental hygiene practice as self-assessed by graduates.	Review of annual graduate survey.	Dept. Chair & Faculty	-Generally positive results. -Some continued concerns about job availability in Wichita. - Lower scores on a) recognizing medical and dental emergencies and recognizing commonly used medications. -Comments on need for more use of digital x-rays and dental software. Department implemented use of Eaglesoft for dental and periodontal charting in Jan. 2012. Meeting is scheduled with Development Officer to brainstorm fundraising ideas to assist with needed technology such as more digital radiography units.
Students will have an acceptable level of satisfaction with the program as self-assessed just prior to graduation.	Review of annual Exit Survey.	Dept. Chair & Faculty	2012 results were mixed. 87% reported being express satisfied or very satisfied with the program. Comments ranged from "loved the program" to "it was unorganized most of the program". Not clear where the negative comments were coming from as 2011 results were very positive. Department had deliberately increased the amount of writing required and this was not well received. Developed a list of paper assignments throughout the program to review and determine in August if adjustments need to be made.

Curriculum Review

DH 311 – Preclinic
Added two exams in lieu of a midterm exam to give a better distribution of assessing progress. Introduced periodontal charting and restorative charting in the clinic practice management program.

DH 319 - Dental Materials
Minor revisions included adding patient instructions to procedures. Revision for next year will include incorporating computer language, especially tooth surfaces for restorative into lecture. Revisions will also include instructions for all procedures. The lab activity for desensitizing agents will include "reading the manufacturers' directions". In addition, time will be incorporated to discuss citing for the lab paper.

DH 317 – Radiology
Added an exam and additional quizzes in order to evaluate student progress more frequently.
Added an additional lab session in order to allow remediation and re-testing on the Lab Exam for critiquing dental x-rays. Kept students in same 5 member groups at each lab session-one student complained of always having to be in the late session, will return to the weekly one hour rotation next year. Recommend a new digital sensor holder system for next year. Planning to modularize units of study and incorporate weekly quizzes to be able to identify students who are need academic advising earlier in the semester, to prevent failure on major exams and the final exam. Will update PPT presentations to correspond with new text and units of study.

DH 318 - Anatomy & Histology
Added two exams in lieu of a midterm exam to give a better distribution of assessing progress.

DH 331 – Concepts I
Added two exams in lieu of a midterm exam to give a better distribution of assessing progress.

DH 332 – Clinic I
Required students to do periodontal charting and restorative charting in the clinic practice management program with new and recall patients.

DH 314 – Periodontics
Minor revisions of adding learning activities to class were incorporated. Students felt papers were a beneficial activity; however, more time is needed to discuss citation. Will pursue Arestin® for clinic use to improve application of knowledge and add motivational interviewing.

DH 334 – Evidence Based Practice
This course is an interprofessional course with Nursing students. Students express frustration with content of course. Don't see need for this content and don't particularly like being combined with another program.

DH 333 – Clinic II – Continue with Dietary Analysis Project being evaluated in this course

DH 431 – Concepts II
No significant changes to the course this year. Continued with adding observation of autistic children in preschool setting. Included 2 students to participate in autistic screenings as an Interprofessional educational opportunity, as they learned how to conduct oral screenings on these types of patients. Continued requirement of case based exercises, computerized testing to prepare for National Boards, and group presentation of topic not presented by instructor in class.

DH 434 – Clinic III
Added Anesthesia Feedback to this semester instead of spring senior year, and this encouraged students to get over their fear of giving anesthesia as soon as they completed that portion of the course in the fall. Much more acceptance of giving anesthesia in the fall rather than waiting until the spring.

DH 416 – Pain Management
Taught the course in 11 weeks to allow students to administer injections earlier in clinic. Students appreciated finishing earlier but not all chose to use additional time to their advantage – only did the required amount. Discussed moving course

into summer or Presession. Economic constraints exist and concern over "forgetting" what they learned during summer were brought up. No planned changes at this time.

DH 410 – **Community I –** Make sure the statistics content remains here from feedback in the Evidence Based course.

DH 470 – Issues Should this be a 2 credit course or should it be removed and a capstone course developed instead. Discussion in the fall semester regarding this question.

DH 432 – Concepts III- Created new rubric for writing one page reaction papers. Students required to write a reaction paper for each guest speaker who presented oral presentations on specialty are of dentistry. Student feedback reported "too many papers" this semester. Geriatric case studies feedback-also "another paper," per students. Discussed other methods of student evaluation of learning and this instructor is open to new ideas. Student PPT and oral presentations were excellent.

DH 435 – Clinic IV
Added new rotation to AEGD this semester and discussed the outcomes/benefits of this. There is more refinement to make in regards to what the students are capable of doing in a more private practice centered experience. Also, need to make refinements in how the students work with the residents as AEGD gets a bigger patient base.

DH 407 – Ethics
Added an HIV observation of a local dentist who provides HIV clinics to area patients. Students had mixed reviews, but overall were informed on how this population receives dental care in this area. Continued with case studies of ethical dilemmas in class, and problem solved with ethical decision making. Added team based quizzing that students did for 30% of their course grade. They quizzed by themselves first, and moved into teams (had the same team each week) and took the quiz together. Students seemed to really like the chance to interact in class together and learn from eachother.

DH 440 – Community II – Faculty teaching this course has left the university and was not able to provide feedback for this meeting.

2013 Assessment Report
2012-2013 Academic Year
Dental Hygiene Program

Program Goals: 1) Provide a Bachelor of Science in Dental Hygiene in this geographic area which will attempt to meet societal needs. 2) Provide educational experiences which will enable program graduates to achieve licensure as a dental hygienist in any state.

Program Objectives	Assessment Methods/Data	Responsibility	Results/Changes
Maintain a quality accredited curriculum consistent with the Program mission, vision and values.	The program will conduct program and curriculum review annually to include: -accreditation annual reports and site visits	Dept. Chair	Completed Annual Accreditation Report.
Document regular assessment and modification of the curriculum and program.	The program will conduct program and curriculum review annually to include: -course evaluations -graduate surveys -employer surveys (every 2-3 yrs.) -graduation rates -quality assurance review of clinic	Dept. Chair & Faculty	Annual program and curriculum review were completed. See individual reports for detail. (Quality Assurance Plan, National Boards, Clinical Boards)
Review and monitor board performance with results expected to be at or above the regional or national average.	Review board performance on written and clinical board examinations.	Dept. Chair & Faculty	**2013 Graduates:** **Written boards** – 96.8% 1st time pass rate. **2012 Graduates** **Clinical boards** – 93.9% 1st time pass rate. Regional average is 90.47%.
Maintain student, faculty, and Program policies as required by CODA and WSU.	Review student, faculty, and clinic records for compliance with policies.	Dept. Chair, Office Specialist, Clinic Manager, and Faculty	See Quality Assurance Report for clinical record review.

Student Objectives	Assessment Methods/Data	Responsibility	Results/Changes
Students will obtain the academic and clinical foundation required to practice as a member of the dental team which develops and implements	Review of individual courses. Review of student course completion. Review of student completion of all clinical competencies.	Dept. Chair & Faculty	See Curriculum detailed information at end of report.

comprehensive dental hygiene care.			
Students will successfully complete the National Board Examination.	Review National Board results.	Dept. Chair & Faculty	**2013 Graduates:** **Written boards** – 96.8% 1st time pass rate. D value scores are mixed again this year. Consulted with CHP statistician to better understand the mixed results. Overall pass rate is strong. To work on having more scores in + category. 1) Gave faculty the section of the guidebook for National Boards that includes test question format and content outline. Asked faculty to review and modify exams to include all formats of questions, 2) Consider in class group activity for reviewing questions on case studies, 3) Request B. Smith meet with faculty to discuss test construction and statistical analysis review.
Students will successfully complete a clinical board examination.	Review of clinical board examination results.	Dept. Chair & Faculty	**2012 Graduates** **Clinical boards** – 93.9% 1st time pass rate. Regional average is 90.47%. Reviewed data and made no suggestions for change at this point.
Students will have an appropriate level of knowledge of dental hygiene practice as assessed by their employer.	Review of employer surveys every 2-3 years.	Dept. Chair & Faculty	NA for 2012-13
Students will have an appropriate level of knowledge of dental hygiene practice as self-assessed by graduates.	Review of annual graduate survey.	Dept. Chair & Faculty	1) Concerns about limited experience with digital radiology. In 2013 4 new digital x-rays and a new/replacement digital panoramic machine were purchased. 2) Request for more instruction in dental software. The department has instituted the use of medical history and treatment notes in Eaglesoft this year in addition to EIE, dental chart, and periodontal chart in 2012 Spring.
Students will have an acceptable level of satisfaction with the program as self-assessed just prior to graduation.	Review of annual Exit Survey.	Dept. Chair & Faculty	53% said satisfied 34% said very satisfied 87% are satisfied or very satisfied No changes made specific to this survey

WSU General Education Learning Outcomes - 2013				
	Assessment Tools (portfolios,	**Target/Criteria (desired**	**Results**	**Analysis**

	rubrics, exams)	program level achievement)		
Critical thinking/case management.	Performance on the CaseBased component of National Boards.	Each graduating class' average score is at or above the national average.	d-value is -0.19 on National Boards. In contrast the WSU Exit survey 90.9% students assess themselves at competent or very competent in critical thinking.	Faculty need to increase number of cases or questions for each case in their respective courses. Mrs. Trilli will distribute to faculty a list a common errors on geriatric cases. Suggestion to include review of test cases as in-class activity. Consider using cases in textbooks during class time for preparation.
Ability to complete mathematical equations; dosage, measurements, angulation, and infection control.	Completion of an entrance and exit exam on these skills.	100% of students achieve a score of 85% or higher on the exit exam.	17/34 met the 85% score on the post test. WSU Exit Survey 78.30% students assess themselves as competent or very competent in numerical literacy.	Consider including performance on this test as a grade or extra credit in a course. Let students know when it is scheduled the skills to be tested. Faculty will review questions and make adjustments in courses to strengthen skills on their questions.
Satisfactorily communicate with patients regarding their oral health and the appointment.	Items #6, 7, and #8 on the Patient Satisfaction Surveys completed twice a year in the clinic.	Each graduating class' average score is at or above 3.5. Scale is 1-4.	Item #6 average was 3.9 Item #7 average was 3.8 Item #8 average was 3.8 WSU Exit Survey 91.5% students assess themselves as competent or very competent in oral/written communication.	Performance is strong but there is a perception/concern that all students aren't making sure the patients are filling out the survey. Have Clinic Manager hand out the survey to patients when they pay during Fall semester and re-assess the procedure.
Produce effective written communication on designated assignments.	Performance on the following assignments; Periodontal patient case and Special Needs patient case. A common set of components in the grading rubrics for these assignments will be used to evaluate this competency.	100% of students achieve a score of 80% or higher on the identified components of the rubric used to evaluate all the assignments.	100% above 80% WSU Exit Survey 91.5% students assess themselves as competent or very competent in oral/written communication.	Good performance on this measure, no change needed.

Curriculum Review

DH 311 – Preclinic
No substantial changes this year except for tutorials on use of Eaglesoft patient records. Continue with introduction of ultrasonics in preclinic. Will distribute kit during New Student Orientation instead 1st day of class.

DH 319 - Dental Materials
Added more lab instructions that were available during lab sections. Requested from prior year. Should she include paper dental charting for more experience? It occurs already in Preclinic and Radiology.

DH 317 – Radiology
Increased the number of weekly quizzes. Radiation safety lecture was moved to 1st lecture. Shifting emphasis to more digital exposure than film exposure in lab due to complete digital capability now. Update the quality of films used in lab exercises. – more experience in calculus detection and dental charting. Keep Exam #1 as a major exam.

DH 318 - Anatomy & Histology
Class is stable. No substantial changes.

DH 331 – Concepts I
Eliminated one textbook. Is rethinking that decision since it has a lot of cases. Would like to know if any other faculty would utilize the book in other courses.

DH 332 – Clinic I
Placed Oral Hygiene Feedback evaluation into this course from Presession. Students were very good at "presenting their patient" to faculty at initial check-in. Included use of Treatment notes in Eaglesoft during this semester.

DH 334 – Evidence Based Practice
Is an interprofessional course with Nursing. Student comments included that it was somethings I knew (searching literature) and then other focuses integrating medical with dental hygiene and other health professions. Students didn't believe a course in statistics would be necessary to be successful in this course.

DH 335 – General & Oral Pathology
Course is strong on performance on National Boards. No changes at this time.

DH 314 – Periodontics
Added motivational interviewing and a class learning activity on the same. Will utilize suggestions on test construction/format and increasing case scenarios to address national board scores. Will send e-mails to clinical faculty when certain topics have been covered.

DH 333 – Clinic II
Minor changes to clinic. Discussed whether the treatment notes can be opened 2 different times on the same day in Eaglesoft. Barb and Clinic Manager will check to see what is possible and notify faculty and clinical faculty in August.

DH 431 – Concepts II
Planning to continue the IPE opportunity and allow students involved in working with autistic children to use that activity for special needs paper. Instructor suggested a class period where student received periodontal treatment planning module. Faculty liked the idea of refreshing students on treatment planning that was more specifically focused on periodontal patients, requirements etc. Include use of chemotherapeutics in our clinic. Need to include an overview of this information during faculty calibration**.**

DH 434 – Clinic III
Suggestion to post Periodontal and Geriatric Patient guidelines somewhere other than Clinic BlackBoard since they need to be available two semesters. Investigate the creation of a BB course for each dental hygiene class to house this type of item. All faculty would have access. Lisa and Kathy can develop a discussion board on Perio and Geriatric patient papers in this course to answer questions from students.

DH 416 – Pain Management
This year course was completed in 11 weeks to allow students to administer anesthesia in fall semester. Students did take advantage of this opportunity. Should we require them to administer anesthesia in fall and not roll over feedback into spring?

DH 410 – Community I
Students are more interested in in-class activities than powerpoints. This class experienced 2 different instructors for the Community I and Community II course. New full-time instructor for all is working on developing activities and coordinating activities and content in both courses.

DH 470 – Issues
Should this be a 2 credit course? Potential for shifting a credit hour to either Concepts and a capstone course or adding an hour to Ethics – make it Ethics and Career planning. Pursue a curriculum change this fall to address this idea.

DH 432 – Concepts III
Reduced reaction papers by half. Introduced participation papers. Instructor felt the participation papers did not have create the same class engagement by students. Student comments were they liked learning the dental information (insurance, surgery, root canals) that they would be utilizing in practice. Strong performance on geriatric patient papers. Instructor felt the electronic treatment notes (and the standard template) contributed to the excellence of the work.

DH 435 – Clinic IV
Need faculty calibration on initial therapy, periodontal debridement. Kelly and Lisa will work on "cheat sheet" for faculty to use in fall calibration. Should the margination requirement be moved into Fall semester? Consensus is yes. Could the requirement be rolled over into Spring if not finished in fall? Will consult with Senior Clinic Coordinator.

DH 407 – Ethics
Concern expressed at some overlap in courses in this semester. At end of each semester have on faculty meeting schedule the chance to discuss assignments for next semester to prevent overlap. Would like to see more practice management. Consider making this a 3 credit course with a credit hour taken from Issues. New content would be Practice Management.

DH 440 – Community II
Would like to see more range of sites for students – different ages, abilities. Wednesday's worked well with GraceMed.

General concerns: Do not allow excused time for illness in clinic. Any absence must be made up and rotation absences must be made up at the same site. Concerns about GraceMed that students aren't being allowed to work very much. Department will meet with facility to address concern.

Need to have some decisions about use of chemotherapeutics. Need calibration on initial therapy. Discuss in August and finalize. Then will add this information to clinical faculty calibration.

Library training for entering students - utilize library personnel; they will schedule over at library; Barb will place in Preclinic or Lisa in Dental Materials; use APA and refer to student OWL – Purdue – all faculty will use this site.

Barb and Denise will develop a protocol for student's on support or without a patient who refuse to see a patient. Who handles; the consequences. Current consequence of one U on grade sheet is not sufficient.

Request Office of Student Success come in and give presentation roughly 4 weeks into program. Barb will schedule.

Refer issue of Table Clinics to SADHA. Kathy will report to department.

In August, look at "Professional Requirements – PT". Decide whether to move forward.

Lisa/Kathy look at utilizing Perio tab in Eaglesoft and report to Barb. Faculty will discuss in August 8.

College of Health Professions
Goals for Calendar Year 2011

Name: **Denise Maseman**
Department:: **Dental Hygiene** **Date Form Completed**: **January, 2011**

Goals for Calendar Year 2011 (Relate to APM value)	Connection to Department Goals or CHP Strategic Directions (list by number where applicable)	Action (Work) Plan	Expected Outcomes	Evaluation
Excellence 1 – Conduct annual program evaluation including curriculum management, quality assurance, and assessment. 2 – Complete Strategic Planning. 3- Continue work on reshaping for department and college.	1- II; Quality Improvement 2- II, Quality Improvement 3- II, Quality Improvement	1 – Hold annual review meetings for curriculum management, quality assurance and program assessment. 2 – Conduct Strategic Planning meetings with assistance of consultants from CCSR. 3 – Participate in college adaptive forums and identify areas to experiment in dept and college.	1 – Make any modifications to the curriculum, clinic operation, and program as needed. 2 – Determine department focus and direction for next 3 years. 3 – Faculty and/or staff will participate in experiments in reshaping.	1 - Modifications made to program. See Program Review forms. 2 – Strategic Planning Sessions held and plan implementation has begun. 3 – B. Gonzalez serves on Clinical Education Initiative; K Anderson serves on IPE Initiative and D. Maseman serves on Adm., Recruitment, Scholarships & Retention Initiative.
Intellectual Exploration (Research/Creative Work) Develop or continue scholarly activities in the areas of 1) interdisciplinary education (PA & nursing), 2) access to care (nursing), 3) community oral health, and 4) clinical aspects of dental hygiene, 5) levels of dental hygiene care.	V –CHP; Growth of Scholarship	Faculty will pursue scholarship, presentation, and publication.	Faculty will have research agendas with on-going research, presentations, and publications .	Anderson & Maseman have manuscript in process on "Integrating Oral Health Education in to Practice in Physician Assistants. Belt has research in Oral Cancer & Adjunctive Techniques in process. Trilli is participating in Bureau of Oral Health "Senior Surveillance Project".

<u>Enhance Learning</u> **(Teaching)** 1 - Provide educational experiences that will enable program graduates to achieve licensure as dental hygienists in any state. 2 – Investigate different spaces for Dental Materials lab 3 – Participate in development of education model for RDP. 4 – Evaluate interprofessional educational experience with Nursing. 5 – Investigate technologies available for use in DH education. 6 – Pursue "interprofessional education opportunities" in CHP.	1 – Department goal 2 – CHP IV; Physical Space 3 – CHP III; Enrollment growth 4- CHP II; Quality improvement 5 – CHP II; Quality improvement 6 – CHP II; Quality improvement	1 – Operate the program and the clinic. 2 – Explore facilities within and outside of Ahlberg Hall. 3 – Work with consultants to develop curriculum proposal for RDP. 4 – Obtain feedback from students and nursing faculty member on experience. 5 – Contact schools and manufacturers for recommendations on hardware and software. 6 – Discuss with CSD collaboration on a head and neck anatomy course; discuss with nursing a common EBP course.	1 – Students will successfully complete the program and licensure exams. 2 – Identify new partner/and or space for lab. 3 – Curriculum model for RDP. 4 – Decision on making EBP Nursing course the requirement for BSDH program. 5 – Review technologies and determine which are best fit for department. 6 – Shared content or course for Head & Neck with CSD.	1- 97% pass rate for 1st time effort on written board and 94% for clinical boards. 2- Discussing use of lab in AEGD building for permanent future use. Temporary location needed until fund available for renovation in AEGD. 3- Completed RDP program development. 4- Decision still pending. Have had one year of years complete the course. 5- Two faculty participated in Re-Boot camp and department received laptops for clinic. 6 Gonzalez and Mefferd developing Hybrid course on Oral Anatomy & Histology.
<u>Support</u> (Service) 1 – Maintain and enhance professional growth of department faculty, staff and students. 2 – Participate in community oral health activities.	1- CHP II; Quality Improvement 2 – CHP I; Identity	1- Complete and critique Admissions process; conduct New Student Orientations, Advancement Ceremonies, and induction into Honor Societies. Conduct faculty calibrations, inservices and new clinic faculty orientation. 2 – Faculty and students will participate in either KMOM, Give Kids A Smile Day, or Sealant Clinics.	1 – Faculty, staff and students participate in on-going processes designed to continue excellence in the program. 2 – Community will observe school support for these events. .	1- Revised Admissions process in include interviews in 2011; conducted 2 New Student Orientations, an Advancement Ceremony and inducted students into Honor Societies. Hosted inservices on new products. 2 -Faculty and students were visible at KMOM and GKAS.

Retain 1- Monitor student progress in degree program.	1 – CHP; II Quality Improvement	1 – Provide material at Orientations to new students regarding "How to be a successful professional student" and develop early intervention program with any student experiencing academic difficulty.	1 – Decreased number of midterm downs and academic dismissals.	1 – One academic dismissals occurred in 2011 which is lower than prior year. Mid-term down were fewer in 2011.
Recruit 1 – Develop appropriate marketing materials for entry level BSDH.	1 – CHP I; Identity	1 – Develop new materials for communications to interested parties (e.g. community colleges, Bureau of Oral Health)	1 – Distribution of marketing materials to appropriate individuals	1- Due to Strategic Planning efforts this effort was pushed back.

College of Health Professions
Goals for Calendar Year 2012

Name: **Denise Maseman**
Department:: **Dental Hygiene** **Date Form Completed**: **January 27, 2012**

Goals for Calendar Year 2012 (Relate to APM value)	Connection to Department Goals or CHP Strategic Directions (list by number where applicable)	Action (Work) Plan	Expected Outcomes	Evaluation
Excellence 1 – Conduct annual program evaluation including curriculum management, quality assurance, and assessment. 2 – Complete Strategic Planning. 3- Continue work on reshaping for department and college. 4- Begin work on the accreditation document.	1- II; Quality Improvement 2- II, Quality Improvement 3- II, Quality Improvement 4- II, Quality Improvement	1 – Hold annual review meetings for curriculum management, quality assurance and program assessment. 2 – Review Strategic Planning work at each faculty meeting. 3 – Participate in college and department experiments. 4 - Assign sections of Self-Study to faculty and work on data collection and writing the document.	1 – Make any modifications to the curriculum, clinic operation, and program as needed. 2 – Maintain department focus and direction for next 3 years. 3 – Faculty and/or staff will participate in experiments in reshaping. 4 – All full-time faculty will complete portions of the document.	1- Modifications made to program. See Program Review Report. 2- Strategic planning was early agenda item at each meeting. Significant progress was made on implementation of plan. 3- The department participated in numerous activities on reshaping. a) IPE – Case Scenarios with Standardized Patients, DH & PA students in Oral Assessment Lab, DH & N students in Evidence Based Practice working in teams, DH & CSD students working together for autistic children. b) re-organized into School of Oral Health. c) began an experiment on Early Admissions d) staff participation on Staff Work Force Initiative e) faculty participation on the following Initiatives: IPE, Clinical Education, Admissions, Recruitment, Retention and Scholarships f) share staff time with Dean's Office/AEGD 4 – Faculty began work on accreditation Self-Study.

<u>Intellectual Exploration</u> **(Research/Creative Work)** Develop or continue scholarly activities in the areas of 1) interdisciplinary education (PA & CSD), 2) community oral health, and 3) clinical aspects of dental hygiene, and 4) BSDH education.	V –CHP; Growth of Scholarship	Faculty will pursue scholarship, presentation, and publication.	Faculty will have research agendas with on-going research, grants, presentations, and publications	1 –PA Practice Survey publication submitted. 2- ONEP Grant for Developing Oral Health Curriculum for Nursing Student. 3 – Grant Wrigley -Kathy 2- Elder Smiles Surveillance Project. 3 – Research on "Impact of Adjunctive Techniques in Oral Cancer Screening". 4- grant from Provost Office for digital x-ray units.
<u>Enhance Learning</u> **(Teaching)** 1 - Provide educational experiences that will enable program graduates to achieve licensure as dental hygienists in any state. 2 – Investigate different spaces for Dental Materials lab 3 – Evaluate course collaboration with N 325 and determine if this is a permanent curriculum change. 4 – Implement use of clinical components of Eaglesoft. 5- Pursue "interprofessional education opportunities" in CHP. 6 – Revise BSDH curriculum.	1 – Department goal 2 – CHP IV; Physical Space 3 – CHP III; Quality improvement 4- CHP II; Quality improvement 5– CHP II; Quality improvement 6– CHP II; Quality improvement.	1 – Operate the program and the clinic. 2 – Explore facilities within and outside of Ahlberg Hall. 3 – Make a decision on continuing course collaboration. 4 – Develop templates as needed and train faculty, staff and students in the software. 5 – Discuss with CSD collaboration on a head and neck anatomy course. Continue activities with CSD and autistic children. 6 – Identify sub-group and task them with work to make recommendation to the group.	1 – Students will successfully complete the program and licensure exams. 2 – Identify new partner/and or space for lab. 3 – Decision on making EBP Nursing course the requirement for BSDH program and curriculum adjustments as needed. 4 – Students, faculty and staff will utilize effectively the clinical components of Eaglesoft. 6 – Revised curriculum and revisions submitted to curriculum committee.	1 – 96.8% pass rate on written boards and 96.9% pass rate on clinical board examinations. 2 – Relocated lab to 121 and 129 AH. 3 – Curriculum change was made to cross-list EBP course. 4 – Implemented use of oral and periodontal examination, dental chart in both clinics. 5 – CSD (autistic screenings, anatomy discussions), N (EBP course), PA oral examination screenings, CHP – case scenarios with standardized patients; discussions with PT and lectured in Cancer Perspectives. 6 – developed rubric for evaluation of papers written in program. Electronic record

<u>Support</u> (Service) 1 – Maintain and enhance professional growth of department faculty, staff and students. 2 – Participate in community oral health activities.	1- CHP II; Quality Improvement 2 – CHP I; Identity	1- Complete and critique Admissions process; conduct New Student Orientations, Advancement Ceremonies, and induction into Honor Societies. Conduct faculty calibrations, inservices and new clinic faculty orientation. 2 – Faculty and students will participate in either KMOM, Give Kids A Smile Day, or Sealant Clinics.	1 – Faculty, staff and students participate in on-going processes designed to continue excellence in the program. 2 – Community will observe school support for these events.	1 - Revised Admissions process; conducted 2 New Student Orientations, an Advancement Ceremony and inducted students into Honor Societies. Hosted in-services on new products. 2 - Faculty and students were visible at KMOM and GKAS.
<u>Retain</u> 1- Monitor student progress in degree program.	1 – CHP; II Quality Improvement	1 – Provide material at Orientations to new students regarding "How to be a successful professional student" and develop early intervention program with any student experiencing academic difficulty.	1 – Decreased number of midterm downs and academic dismissals.	1 – Instituted Academic Warning Policy.
<u>Recruit</u> 1 – Develop appropriate marketing materials for completion degree BSDH.	1 – CHP I; Identity	1 – Develop new materials for communications to interested parties (e.g. community colleges, Bureau of Oral Health)	1 – Distribution of marketing materials to appropriate individuals	1- Redesign of web page.

College of Health Professions
Goals for Calendar Year 2013

Name: **Denise Maseman**
Department: **Dental Hygiene** **Date Form Completed**: **January 16, 2013**

Goals for Calendar Year 2013	Connection to Department Goals or CHP Strategic Directions (list by number where applicable)	Action (Work) Plan	Expected Outcomes	Evaluation
Teaching 1 - Provide educational experiences that will enable program graduates to achieve licensure as dental hygienists in any state. 2 – Integrate the use of additional digital x-ray into curriculum and clinic operation. 3 – Implement use of clinical components of Eaglesoft. 4- Pursue "interprofessional education opportunities" in CHP. 5 – Convert BSDH completion degree to 100% on-line and grow enrollment contingent on funding from university.	1 – Department goal 2 – Department Goal 3 – Department Goal 4- CHP Goal #3 5– CHP Goal #3	1 – Operate the program and the clinic. 2- Identify changes needed in the curriculum and clinic operation to fully integrate digital radiography. 3 – Develop templates as needed and train faculty, staff and students in the software. 4 – Discuss with CSD collaboration on a head and neck anatomy course. Continue activities with CSD and autistic children. Collaborate with PT on new IPE activity. Collaborate with Nursing on oral assessment. 5 – Identify and hire faculty to develop and /or convert courses for on-line teaching	1 – Students will successfully complete the program and licensure exams. 2 – Maximize use of digital radiography to enhance patient safety, prepare students for dental hygiene practice and record portability. 3- Students, faculty and staff will utilize effectively the clinical components of Eaglesoft. 4 – Increase IPE educational activities. 5 – Have 2-3 courses ready for Fall implementation. Develop marketing plan for new on-line offerings.	1 – 96.8% first time pass rate on written boards and 93.9% first time pass rate on clinical board examinations. 2 – Full integration of digital radiography into the academic course and clinic. Strong participation by students in clinic. 3 – Using all components of the clinical software in Eaglesoft. 4 – Participated in the Patient Simulation IPE, Evidence Based Practice course and introduced new PT IPE activity. 5 – Created one new course and updated two other courses for the on-line degree completion program.
Scholarship 1 - Develop or continue scholarly activities in the areas of a) inter-professional education education), b) community oral health, c) clinical aspects of dental hygiene, and d) BSDH education.	1 – Department Goal	Faculty will pursue scholarship, presentation, and publication.	Faculty will have research agendas with on-going research, grants, presentations, and publications	

<u>Support</u> (Service) 1 – Maintain and enhance professional growth of department faculty, staff and students. 2 – Participate in community oral health activities. 3 – Conduct annual program evaluation including curriculum management, quality assurance, and assessment. 4 – Participate in School of Oral Health Strategic Planning. 5 - Complete work on the accreditation Self-Study. 6 – Monitor legislative activity related to mid-level dental provider. 7- Monitor student progress in degree program. 8 – Develop marketing strategies for degree completion BSDH contingent on university support of program expansion.	1- CHP Goal #2 2 – Department Goal 3 – Department Goal 4 – Department Goal 5 – Department Goal 6 – Department Goal 7 – Department Goal 8 - CHP Goal #3	1- Complete and critique Admissions process; conduct New Student Orientations, Advancement Ceremonies, and induction into Honor Societies. Conduct faculty calibrations, in-services and new clinic faculty orientation. 2 – Faculty and students will participate in either KMOM, Give Kids A Smile Day, or Sealant Clinics. 3 - Hold annual review meetings for curriculum management, quality assurance and program assessment. 4– Represent department on SOH Strategic Planning work. 5 - Faculty write sections of Self-Study. 6 - If legislation passes, initiate discussions with university administration about the possibility of offering a program. 7 – Provide information at Orientations to new students regarding "How to be a successful professional student" and monitor the Academic Warning Policy. 8 – Develop strategies for communications to interested parties (e.g. community colleges, Bureau of Oral Health, KDHA, ADHA, ADEA)	1 – Faculty, staff and students participate in on-going processes designed to continue excellence in the program. 2 – Community will observe school support for these events. 3 – Make any modifications to the curriculum, clinic operation, and program as needed. 4 –Identify role of department in School of Oral Health and participate fully in the structure. 5 – Receive full approval for re-accreditation. 6 – Contingent on legislative results. 7 – Early identification of at-risk students, appropriate advising and review data on results of warning policy. 8 – Increased enrollment in BSDH – completion degree.	1 - Revised Admissions process; conducted 2 New Student Orientations, an Advancement Ceremony and inducted students into Honor Societies. Hosted in-services on new products. 2 - Faculty and students were visible at KMOM and GKAS. 3- Modifications made to program. See Program Review Report. 4 – Two department members participated in development of SOH Strategic Plan. 5 – Self Study submitted to CODA. 6 – No final action on mid-level legislation. 7 – Continued use of Academic Warning Program. 8 – On hold until work with university is initiated.